

THE CONSEQUENCES OF REPRESENTING HUMAN SUFFERING, DISTRESS, AND/OR
VIOLENCE

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Abstract

Within academia, there has been much focus on representations of suffering, distress, and/or violence, including how these representations can foster meaningful change in audience members. The consequences of representing human suffering, distress, and/or violence, however, have received less attention. Given this, in this dissertation, I explore professional actors' lived experiences of representing human suffering, distress, and/or violence. In order to complete this exploration, I undertook a world-first study, uncovering what professional actors' experiences of representing human suffering, distress, and/or violence entail; how these actors respond to working with these complex representations; what concerns, meanings, strategies, and personal consequences these actors describe in relation to this work; and what, if any, support systems assist these actors as they engage with such representations. Throughout the dissertation, I review the themes that were identified in this study and consider what these themes can offer actors, the entertainment industry, and North American society moving forward.

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PREQUIL. SUMMARY OF THE STUDY

In this dissertation I explore professional actors' lived experiences of representing human suffering, distress, and/or violence and the meanings such representations have for the actors themselves. In order to complete this exploration, I undertook a phenomenological, interview-based study, uncovering what professional actors' experiences of representing human suffering, distress, and/or violence entail; how these actors respond to working with these complex representations; what concerns, meanings, strategies, and personal consequences these actors describe in relation to this work; and what, if any, support systems assist these actors as they engage with such representations. I particularly focused on what struggles, issues, and/or transformations actors associate with these portrayals of human life. While images and narratives of human suffering, distress, and/or violence can be found in a wide variety of art, my attention remains on theatre throughout this dissertation as the structure of this medium generates a number of difficult and unique ethical dilemmas.

I employ four theoretical fields to interrogate these dilemmas and unpack the themes that were identified in the study. These fields are: theatre theory, phenomenology, ethics, and trauma studies. Together, they provide the framework necessary to initiate a discussion of professional actors' lived experiences of representing human suffering, distress, and/or violence.

This discussion occurs over six chapters, which build on one another to fully address my study and the themes that were identified within it. Chapter 1 introduces the landscape surrounding the study. I examine topics such as: the role of theatre in society; the role of the actor in theatre; the state of research into representations of human

suffering, distress, and/or violence prior to my study; and the importance of my study.

Chapter 2 provides background for key terms and a review of relevant literature from the four theoretical fields I laid out above. In chapter 3, I outline the study's methodology, data gathering and analysis procedures, and ethics protocols. Chapter 4 then sets out the three core themes that were identified within my study. Following that, I use chapter 5 to consider these themes in relation to relevant literature, including both works introduced in chapter 2 and additional material. Finally, chapter 6 addresses the implications of my study outside the realm of professional theatre and potential areas for continued research in the future.

CHAPTER 1. INTRODUCTION

Introduction to Chapter 1

Over the course of this dissertation, professional actors' lived experiences of representing human suffering, distress, and/or violence are explored. In order to establish and unpack these experiences, I conducted a qualitative, interview-based study. Before addressing this study, however, several introductions need to be made. Within this chapter, I tackle these introductions. To begin, I speak about my journey to my present work, including what initially sparked my interest in actors' lived experiences of representing human suffering, distress, and/or violence. I then move on to the background of the problem, where I address the roles of theatre in society and the actor in the theatre. I conclude by laying out current academic and practical approaches to actors' lived experiences of human suffering, distress, and/or violence. Together, this material provides a strong knowledge base from which to engage with the rest of my dissertation.

My Journey in Relation to This Problem

Questions and concerns regarding actors' lived experiences of representing human suffering, distress, and/or violence first came to my attention in 2006. Late one night, while watching *American Psycho*, I started to feel increasingly disgusted and nauseated. I realized that I was not able to disconnect the film from what I knew of *American Psycho*'s controversial history, including the fact that prosecutors in the Paul Bernardo case argued it was "a blueprint for Bernardo's behavior and crimes" (Kamalipour & Rampal 63). While Patrick Bateman, the film's central character, ran

around with a chainsaw, engaging in a series of gruesome murders, I could not separate myself from the realities of the Bernardo case and the mix of fear, horror, sadness, and disgust I felt in relation to them.

An acting student at the time, I wondered whether Christian Bale, who portrayed Patrick Bateman in the film, knew about this controversy during shooting and, if he did, whether it influenced his experience of performing his role. From there, my line of questioning broadened to consider what other actors could be experiencing when performing characters like Patrick Bateman. What about when representing victims of or witnesses to violence? What, if any, could be the personal costs of taking on such roles and could anything mitigate such costs?

In the spring of 2007, during the final semester of my undergraduate degree, these questions came into focus in a much more personal way when I was cast as Marjorie in my university's production of *Extremities*. Over the course of the play, Marjorie is sexually assaulted in her home before taking Raul, her attacker, hostage and torturing him. At the heart of the show are Marjorie's debates with her two female roommates about whether they should call the police or kill Raul and bury him in the yard. As these debates rage on, Raul tries to convince Marjorie's roommates that she is insane and he is an innocent man. At the show's climax, however, Raul reveals not only that he intended to rape and kill Marjorie, but also that he had been hunting her, watching her comings and goings for some time.

As I moved through the rehearsal and performance process, I encountered a number of unusual experiences, including: having nightmares, feeling agitated and stressed, and growing increasingly anxious. Everyday situations that I had never given a

second thought suddenly seemed unsafe. For instance, I began to worry about being attacked while walking to my car after rehearsals. I was soon constantly glancing over my shoulder, to the point where I had to ask a fellow actor to escort me. My relationships with my cast mates also shifted. While I had been a close friend of the actor playing Raul when we were cast in the show, as we moved through the rehearsal process, I found myself pulling away from him, feeling uncomfortable in his presence. Although I encountered these and other personal costs while working on *Extremities*, I questioned whether this was related to the fact that I was only an acting student, still developing my craft. Would a professional actor have had similar encounters or did I just lack the experience necessary to handle representing this level of human suffering, distress, and/or violence in a safe, healthy manner?

After graduating, I found myself facing this question again, this time as I began a career as a professional actor, working in both theatre and film. Before long, I was consistently booking roles that included narratives and images of human suffering, distress, and/or violence. Even as I developed my craft, gained experience, established a deeper understanding of myself, and built strong personal and interpersonal support systems, my roles continued to carry a personal cost. I wondered if this was happening to other actors as well, but was hesitant to speak with them about my experiences. When I finally opened up, however, the majority of my co-workers were not surprised by the costs I had encountered. In fact, many of them revealed instances of their own, similar encounters. Most had not spoken about these encounters before though, knowing the common industry belief was that actors who had such experiences – when the material did not mirror events occurring in their personal lives – simply could not handle the

demands of their profession, were not properly trained, and/or had deep-seated psychological issues that needed to be resolved.

When I discussed this belief with theatre professionals who were not performers, it became clear to me that actors' lived experiences of representing human suffering, distress, and/or violence were an open secret – known to all but not openly discussed. Most of the theatre artists I spoke with were aware that actors could encounter personal costs when working with such representations, but would not admit this publicly or address it in the workplace. Theatre professionals – performers and non-performers alike – suggested that actors were generally expected to deal with these costs, including any distress, by themselves and outside the workplace.

It appeared to me that fear was playing a role in actors' decisions to remain silent about their lived experiences of representing human suffering, distress, and/or violence. Certainly, fear was one of the reasons I had not discussed my personal encounters more openly. I feared being seen as weak, being judged, or being labeled a poorly trained actor. Most of all, however, I feared losing out on work or being shunned in the industry.

I had an inkling though - from my own experiences and from speaking with my co-workers - that this issue of the personal costs of representing human suffering, distress, and/or violence was significant and deserving of attention. I turned to academia in hopes that theatre scholars could provide answers to the questions I was now asking, including:

Are my co-workers and I anomalies or are other actors also experiencing personal costs when representing human suffering, distress, and/or violence? If other actors are experiencing costs, do they experience them in the same way I do? Are these

costs common? What, if any, support systems are other actors using to mitigate the costs? Are there additional supports that can be of assistance?

Background to the Problem

Introduction to the Background of the Problem

Before directly addressing the questions outlined above, I feel it is important to establish the landscapes of theatre and acting. In order to accomplish this – and in light of the interdisciplinary nature of my study – I provide brief summaries of key information and ideas related to theatre and acting in this sub-section. First, I consider theatre and its role in society, then I address acting theory and the role of the actor within the theatre. In both cases, I draw on the work of Aristotle, Antonin Artaud, Jerzy Grotowski, Bertolt Brecht, Augusto Boal, and Konstantin Stanislavsky. Although many scholars debate the Western canon and the singular theatre history it supports, I focus on this history in my overview as it is commonly taught to Canadian theatre artists during their professional training and remains a strong influence within the acting industry.

The Role of Theatre

Goals

For the ancient Greeks, theatre was considered a vital component of society. Many scholars believe it emerged from forms of worship to the gods, specifically Dionysus (Brown 14). Soon, however, theatre was recognized as a way to share stories of gods, heroes, and celebrated human beings, and came to be seen as its own, unique art form (McLeish & Griffiths 1-2). As performances became longer and more elaborate,

theatre also took on a civic element (McLeish & Griffiths 7). By Aristotle's time, theatre was considered an essential way of reinforcing understandings of Greek life and citizenship. Aristotle then expanded upon this, presenting theatre as a means to inspire, teach, and provide a safe outlet for emotions (Grange 32-34). Thus, Aristotle's theatre was one of social service, while allowing for learning, growth, and release.

Although, in his writings, Aristotle focused on the theatre as a means for individuals to understand and embrace the societal status quo, four other key theorist/practitioners took radically different approaches. Artaud, Grotowski, Brecht, and Boal all argued that theatre should challenge and empower its audience members. They did not, however, agree on what that challenge should be or that empowerment would look like. Artaud and Grotowski concentrated on challenging their audiences on a personal level (Artaud 13; Grotowski 42). True theatre, in their eyes, works as a wake-up call, tearing away the banal in order to reconnect people with life and their core selves (Artaud 13; Grotowski 42). While Brecht and Boal retained this idea of challenging audience members on a personal level, they also focused on societal change.

In spite of their shared interest in societal change, Brecht and Boal still saw theatre's purpose differently. Brecht approached the theatre as a place where audience members should be encouraged to critique society, wanting them to leave with the knowledge and desire necessary to create socio-political change (37). Boal took this idea one step further, seeing theatre not just as a place to spark the desire for change but to test techniques for revolution (*Theater* 141). In some cases, his theatre even moved beyond this, becoming a form of activism in and of itself. Thus, for Boal, theatre's purpose is to

change audience members and, through them, the larger socio-political landscape (*Theater* xxi).

In clear opposition to this theatre of challenge are Stanislavsky's approach and the various schools of theatre and acting training that emerged from his basic principles. Coming from an acting background, Stanislavsky became fascinated with the idea of actors using their own circumstances to "truthfully" create their characters' experiences and then communicate these experiences to audience members (*An Actor Prepares* 14). In relation to his work at the Moscow Art Theatre, Stanislavsky stated, "Always we sought for inner truth, for the truth of feeling and experience" (qtd. in Brown 356). Generally focused on naturalistic shows, Stanislavsky's theatre was based in both the actors and audience members engaging with their personal, internal landscapes. Thus, theatre's purpose, for Stanislavsky, is tied to building and communicating characters' emotional truths and lived experiences (*An Actor Prepares* 16).

Styles

As the last sub-section demonstrated, theorist/practitioners' goals for the theatre have varied widely. This difference in goals is closely tied to an equal difference in style. The fact that each of the approaches outlined above brought its own, unique theatrical style should be no surprise as style can have a significant impact on the interplay between the audience and the production and, therefore, can heavily influence whether or not theorist/practitioners' goals are achieved. It is vital, then, to understand the theatrical styles Aristotle, Artaud, Grotowski, Brecht, Boal, and Stanislavsky endorsed. In this brief overview, I only focus on one or two stylistic elements from each man's approach. In

addition, as the role of the actor is discussed later in this chapter, I set aside acting centred stylistic elements for now.

Writing in relation to ancient Greek theatre, Aristotle took a strong stance on what theatrical style “should” be. In *Poetics*, he outlined six essential elements that he felt make up a piece of theatre, ranking them in order of importance. These elements are: plot, character, diction, thought, spectacle or the visual elements, and music (Walton 16). As this list shows, Aristotle had little interest in the spectacle of theatre, even arguing that, “Spectacle ... has nothing to do with poetry.” (*Poetics* 1450b) For him, reading a tragedy could convey as much as seeing it (Walton 17). This fundamentally ties Aristotle’s theatre to story.

Within the realm of story, Aristotle believed there are two vital components: a scene of suffering (*Poetics* 1452b) and a reversal of fortune (*Poetics* 1452a). Aristotle’s investment in these two elements was linked to ancient Greek theatre’s role of civic service intended to help citizens connect with royals, heroes, and gods; feel the, apparently, elevated emotions of these high-status individuals; and release these emotions in a safe environment (*Poetics* 1452b-1453a). By including a scene of suffering and a reversal of fortune, a tragedy could – according to Aristotle – provide audience members with a “proper” emotional build and an “appropriate” cathartic release (*Poetics* 1452b-1453a).

The cathartic release was key for Aristotle as he believed that all human beings have access to intense and potentially destructive emotions and, therefore, need a safeguarded space to release them, especially pity and fear (Walton 20-21). Thus, he viewed catharsis as “a beneficial, uplifting experience, whether psychological, moral,

intellectual, or some combination of these” (Carlson 18-19). In order to achieve this, Aristotle argued that tragedies must be carefully constructed, using elements such as the scene of suffering and the reversal of fortune, to build pity and fear within audience members (Walton 20-21). At each show’s climax, these emotions are apparently released, leaving audience members cleansed (Walton 20-21).

While theatre has evolved since ancient Greek times, Aristotle’s style has influenced many other theorist/practitioners, including – notably - Artaud and Grotowski. Like Aristotle, both Artaud and Grotowski showed a great interest in transcending theatricality. Unlike Aristotle, however, who wanted to maintain the societal status quo, Artaud and Grotowski believed that theatre should seek to challenge quotidian – or everyday – reality (Artaud 85-86; Grotowski 210). They felt that transcending theatricality would allow actors to tear away social niceties and societal expectations to reveal hidden emotional truths (Artaud 85-86; Grotowski 210).

Although Artaud and Grotowski both wanted to transcend theatricality, they did not agree about how that could be accomplished. Artaud suggested that, by running headlong into theatricality, theatre artists could surpass it, ripping away the banalities of life (84-86). He argued that theatre needs to move beyond text (Artaud 89) and enter the realm of extreme actions (Artaud 84-85) and danger (Artaud 42). In addition, he believed that theatre should be filled with “true action, but without practical consequence” (Artaud 115). Grotowski, on the other hand, looked to transcend theatricality by exploring ritual and poverty in the theatre (20-21). As a director, he kept his theatre poor, removing “superfluous” props, costumes, lights, sound, and scenery (Grotowski 20-21). By doing

this, Grotowski felt the central element of his performances - the relationship between the actor and the audience - would be revealed (19-21).

Stanislavsky was also invested in highlighting the relationship between the actor and the audience in his practice. In fact, he built his approach around this dynamic, believing that the actor's creativity is at the core of theatre's vitality (Roose-Evans 7). Actors' work, thus, became central to the style of Stanislavsky's theatre, which focused on mirroring the realities of life (Mitter 8). Employing techniques from realism and naturalism, Stanislavsky aimed to construct a full world on stage and draw audiences into it, allowing them to discover previously hidden truths about humanity and human experience (Mitter 8).

While Stanislavsky worked to reflect the world and its truths onstage, Brecht did the opposite in his practice, using a technique called the alienation or A-effect to make the world appear strange to audience members (Carlson 385). As Brecht described it, the A-effect, "consists in turning the object of which one is to be made aware, to which one's attention is to be drawn, from something ordinary, familiar, and immediately accessible, into something peculiar, striking and unexpected" (143). Through this experience with the unexpected, audience members are encouraged to re-examine their concept of "normal" (Brecht 143). The A-effect also works to maintain a separation between the audience members and each performance's narrative, so viewers both think and feel rather than simply give themselves over to an empathic response (Brecht 270-271). At the same time, however, Brecht was committed to his theatre being pleasurable and entertaining (180) – the spectator just had to remain free to intellectually engage at the same time (191). To achieve this, Brecht employed a form of theatricality that made clear

reference to itself, encouraging audience members to stay aware that they were watching a theatre performance (143). Certainly, then, a clear line can be drawn between Brecht's desire to encourage people to think critically about their socio-political environment and his stylistic choice to employ the alienation effect.

The style employed by Boal was similarly tied to his interest in challenging the socio-political status quo. In fact, he was so invested in fostering revolutionary change that he created several types of theatre meant to challenge audiences in different ways (Boal, *Theater* 126). Three of Boal's types of theatre that have achieved the widest recognition are Legislative Theatre, Invisible Theatre, and Forum Theatre. While these types differ drastically, one stylistic element remains consistent – the choice to not have round, lifelike characters. Considering Forum Theatre in particular, there are two clear reasons for employing two-dimensional characters. First, like Brecht, Boal wanted audience members to stay focused on the socio-political message of the show rather than become absorbed into individual characters' journeys. Second, as Boal wanted the theatre to be a rehearsal for revolution, he built audience participation into the Forum Theatre structure (Boal, *Theater* 141). Over the course of each show, audience members have opportunities to take on various characters, replacing the actors (Boal, *Theater* 168). Therefore, according to Boal, Forum Theatre's characters need to be flexible enough for audience members to feel comfortable stepping in (*Theater* 168). Characters cannot turn into masterpieces, owned by a specific performer and difficult to portray (Boal, *Theater* 168). Rather, they need clear traits and a strong purpose within the show, allowing audience members to easily step into each character and represent his/her perspective (Boal, *Theater* 168).

Desired Consequences

While the styles and purposes outlined above are important in their own right, they also work in tandem with each theorist/practitioner's desired consequences, which include both what the theorist/practitioner wished to have happen and what he believed would happen when his material was performed in front of an audience. As with their goals, Aristotle, Artaud, Grotowski, Brecht, Boal, and Stanislavsky's desired consequences focused on the personal and/or societal. Although all approaches to theatre can be argued to have both personal and societal implications, whether explicit or not, this sub-section only discusses consequences highlighted by each theorist/practitioner.

Attending to the personal, Artaud and Grotowski sought to liberate audience members' core selves (Artaud 84-85; Grotowski 42). To achieve this, the two theorist/practitioners wanted the theatre to rip off viewers' societal masks, believing this act of aggressive confrontation of self would set audience members on a path toward freedom (Artaud 84-85; Grotowski 42). From there, Artaud and Grotowski intended their theatres to encourage audience members to disentangle themselves from societal restrictions and engage in an elevated form of personal analysis (Artaud 86; Grotowski 42). Both men felt these were steps on the way to their true desired consequence – audience members freeing their authentic selves (Grotowski 40).

Although Aristotle supported the idea that theatre could have significant personal consequences, he did not seek to remove society's influence nor set people free. Rather, he wanted audience members to gain personal control in the quotidian through cathartic release (Walton 20-21). He believed that, if theatre gave audience members a controlled

emotional build and release, these individuals would then be able to allow rationality to reign in their quotidian lives. Thus, while Aristotle's theatre strove for powerful emotions and connection, his desired consequence in the personal realm was reducing emotionality and increasing rationality in quotidian life.

In addition to the personal, Aristotle also sought for his theatre to have a societal consequence – helping shift the world from reality to the ideal. In ancient Greece, everything - including living beings, inanimate objects, and concepts - were seen as being en route to becoming their ideal selves (Carlson 17). Aristotle argued that playwrights should use theatre to represent ideal images of high-status individuals, concepts, and traits and show the downfall of the non-ideal (*Poetics* 1452b-1453a). Of course, as representations are created by human beings, Aristotle believed that even the ideal images still contain flaws (*Poetics* 1453a). In spite of this, however, they at least provide audience members with glimpses of the ideal, encouraging them to continue seeking it (Aristotle, *Poetics* 1454b).

Brecht similarly intended his theatre to have societal ramifications, but he approached the societal through the personal. As discussed above, Brecht created theatre to drive people to social reform. He believed, however, that this could only be achieved by reaching audience members on a personal level. Thus, Brecht's first desired consequence is that audience members explore their attitudes toward others (86) and notice any contradictions between these attitudes and their actual relationships with the others (Zarrilli, *Acting (Re)Considered* 250). From there, he wanted people to move their analysis to social structures, believing this would then lead to his ultimate desired consequence - audience members altering inequitable social structures (Zarrilli, *Acting*

(*Re*)*Considered* 250). Thus, while Brecht designed his theatre to have personal consequences for audience members, these were just in the service of creating larger, societal reforms.

Boal's desired consequences have often been viewed in a similar light to Brecht's own; but, in actuality, Boal sought both a personal and a societal impact (*Theater* 138). In fact, in his writings, he argued that the two are fundamentally woven together (Boal, *Theater* 141). Certainly, Boal wanted his theatre to change unjust political structures, systemic inequities, and people's attitudes to one another. These shifts, however, were not enough. He also wanted his theatre to give people the confidence and drive to transform society (Boal, *Theater* 147). His interest was not, then, for theatre to create change from the outside, but for it to empower viewers to create their own vision of change and turn that vision into reality. As he desired socio-political change through personal empowerment, Boal's work fused together personal and societal consequences, suggesting that – ultimately – they cannot be divorced from one another (Boal, *Theater* 141).

Power

The previous sub-sections have focused on the differences amongst various theatrical approaches. From goals to style to desired consequences, each approach carried a unique perspective. There is one area, however, where the theorist/practitioners in question demonstrated little in the way of variety. That area is belief in the power of theatre.

The idea that theatre can connect audience members to something greater than themselves has a long history, appearing as early as Aristotle's *Poetics*. For some theorist/practitioners, theatre could be a means of worship or communication with a higher truth. Other theorist/practitioners, however, have seen theatre as a mean to connect viewers to universal elements of existence. It is this ability to touch on the universal that inspired Aristotle to argue that tragedy is "something more philosophic and of graver import than history" and to identify imitation as an integral part of what differentiates humans from life forms (qtd. in Berger 79).

If theatre can be viewed as a link to our shared humanity, it can also be understood as an opportunity for audience members to connect with themselves. It is this power to put individuals in touch with their own thoughts and feelings that Artaud highlighted when he declared that theatre "probes our entire vitality, confronts us with all our possibilities" (86). This concept also appeared in Stanislavsky and Grotowski's approaches. As their writings and performances demonstrated, within the safety of its imaginary structures, theatre has the power to help people discover truths about themselves (Grotowski 40; Stanislavsky, *An Actor Prepares* 14-15).

Theatre, however, is about more than discovery. At its core, it is based in action; and, theorist/practitioners consistently argued its ability to inspire action in others. This is apparent in the consequences Aristotle, Artaud, Grotowski, Brecht, Boal, and Stanislavsky desired from their work. In every case, the men saw theatre as an opportunity to foster personal and/or societal change (Aristotle, *Poetics* 1454b; Artaud 86; Boal, *Theater* 138; Grotowski 40; Stanislavsky, *An Actor Prepares* 14-15; Zarrilli,

Acting (Re)Considered 250). Boal, perhaps, stated it best when he explained that, “Theatre can help us build our future, rather than just waiting for it.” (*Games* 16)

Perhaps the greatest indication of Aristotle, Artaud, Grotowski, Brecht, Boal, and Stanislavsky’s belief in the power of theatre, however, is their decisions to dedicate themselves to the medium. Each man made sacrifices to be able to engage with and/or produce theatre. In many cases, their entire lives ended up revolving around their work. Why would these theorist/practitioners have contributed this level of time, energy, and attention to theatre unless they believed in its power and importance?

The Role of the Actor

While there have been and continue to be multiple approaches to theatre, there are as many – if not more – to acting. These approaches demonstrate that, over the centuries, many thinkers, scholars, and artists have been drawn to the powerful, mystical realm of performance. They have dedicated time and attention to acting, writing about acting, and/or working with actors, considering both how to assist and get excellence from them.

Within the Western cannon, ancient Greece is credited as the birthplace of professional acting (O’Connor vii). In spite of this, the actor was not given much power or recognition at first. Looking at the works of major ancient Greek philosophers, such as Plato and Aristotle, it is clear that the actor was framed as secondary to the writer (Walton 17). In fact, as I have already discussed, Aristotle focused his attention almost exclusively on script elements, even suggesting that there is little or no difference between reading a piece of theatre and seeing it performed (Walton 17). He did not view

acting quality as relevant to the success of a play, at best positioning the actor as a technician who should work in service of the writer's purposes (Walton 17).

As theatre evolved, however, actors gained attention and importance in ancient Greek high society. In fact, Pat Easterling argued that the idea of the actor as icon began to emerge (Easterling & Hall 327). To support this, Easterling pointed out that a prize for best actor was first awarded in 449 BC at the Athenian city Dionysia (Easterling & Hall 327) and that "some actors [were becoming] both extremely famous and extremely rich" (Easterling & Hall 331). In his writings, even Aristotle bemoaned that popular actors were becoming an obstruction, separating the audience from the play and its story (McDonald & Walton 94). The increasing level of public interest in and recognition of performers is understandable in light of theatre's significant social role in ancient Greece. After all, actors were the face of a key component of ancient Greek life.

Looking at the period from the Restoration up to the 1900s, and using Britain as a case study, it is clear that the focus on actors continued to grow. In spite of this, however, the theatre was generally considered an inappropriate career for those with social standing (Richards 10). Therefore, a tension emerged between performers getting noticed and receiving attention – some even becoming icons – and performers being denigrated – at times even being compared to prostitutes (Richards 10). Scholars have suggested that this tension was connected to the fact that, while on stage, actors could break societal norms and expectations of the times, including those related to gender and sexuality (Powell 113). This gave actors an air of freedom and danger. That, in combination with a general mistrust of people who could create emotions on demand, spawned both a desire for and fear of actors (Holland 63).

From the Restoration until the 1900s, acting techniques were largely frozen in England. Certainly, there were elements of the art form that shifted and developed, but the core remained unchanged. Acting was largely based on what the audience saw rather than on characters' internal experiences (Brown 186). The idea of subtext was still unknown and little attention was given to realistic portrayals of emotions (Brown 181, 186-187). In fact, according to Felicia Hardison Londre, "[m]ost actors had no thought of living the part, but preferred to take the spectators into their confidence to share an idea about a character." (43)

Actors would perform the thoughts given to them in their lines, with asides and monologues being used to communicate more complex ideas. In addition, codified systems - such as illustrative gesture, where specific body placements are used to convey emotions - were used to communicate characters' journeys for much of this time period (Roach 29). Once actors knew the alphabet of gestures and their corresponding emotions, they just needed to break down the emotions and perform the corresponding gestures, allowing for shows to be put up with little to no rehearsal. Although this method was cost effective and efficient, it led to performances that would often be viewed as unrealistic and exaggerated by contemporary standards (Londre 43).

Everything changed, however, when Stanislavsky established his approach, becoming the father of contemporary understandings of acting and actors. Stanislavsky and his protégés, including Uta Hagen, Stanford Meisner, and Lee Strasberg, reshaped the nature of acting in Western culture in three key ways. First, the actor was promoted as the centre of the theatre. Stanislavsky argued that actors make productions; hence the audience needs to connect with the actors onstage in order to engage with a show (*My*

Life in Art 199). Given this, he felt that actors' work must be understood by other theatre artists, especially by directors (Stanislavsky, *My Life in Art* 199). Essentially, Stanislavsky positioned the actor as special, mystical, and fascinating - the one who provides a gift to others through performance (*My Life in Art* 199). Michael Chekhov summarized the magic of Stanislavsky's actor, saying that s/he "imagines with his[her whole] body" (Zarrilli, *Psychophysical Acting* 20).

The second major change was increasing the intensity of actors' work and training. Stanislavsky wrote about the importance of dedication, encouraging actors to engage in long-term training to hone themselves as creative instruments (*An Actor Prepares* 17). Through this training, they apparently develop not just their movements and voices, but also their imaginations, emotional landscapes, and self-knowledge (Stanislavsky, *An Actor Prepares* 14-15). Stanislavsky presented this level of training as a necessary basis for an acting career (*An Actor Prepares* 17). Then, beyond it, there is more work to do in relation to each show. Stanislavsky's approach requires actors, after being cast in a role, to look into the show's time period and culture, identify the script's sub-text, and find resonances between character and self (French & Bennett 327). Only by intense training and self-analysis, extensive work for each role, and bravery and vulnerability did Stanislavsky and his followers believe actors could connect with their audiences (Roach 211-212).

While these first two changes were important, the greatest shift brought about by Stanislavsky was the move to psychophysical acting. Unlike previous approaches, which focused on what audience members were seeing and often included a presentational quality, psychophysical approaches are based on the idea that acting needs to combine

both the internal and external (Stanislavsky, *An Actor Prepares* 15). Since its introduction, psychophysical acting has often been used in the service of creating realistic representations on stage, a goal Stanislavsky was strongly invested in (Stanislavski 19). To represent characters as realistic and rounded, Stanislavsky felt that the complexities and layers found in the quotidian realm needed to be brought to the theatre (Stanislavski 19). By drawing upon the emotional, the physical, and the intellectual, psychophysical approaches allow for multi-layered, realistic characters that can say one thing, think another, and feel yet another.

As well as realistic portrayals, Stanislavsky and his protégés sought human connection and genuine emotion in the theatre (Stanislavski 19). They believed these could be achieved by fusing characters' given circumstances with actors' truths (Stanislavsky, *An Actor Prepares* 121-122). In fact, Stanislavsky's system for building characters is based on actors considering how they themselves would respond if they lived in their characters' given circumstances (*An Actor Prepares* 56-60). Theorist/practitioners in this tradition argued that when actors bring themselves and their humanity to their work, a link can be forged with audience members' humanity (Stanislavski 661). Therefore, in their methods, Stanislavsky and his protégés asked actors to draw on their thoughts, feelings, imagination, and experiences in each and every role, as well as to truthfully listen to and engage with the other actors. By doing this, actors can, in theory, create an emotional, truthful response in both their co-workers and audience members.

Some theorist/practitioners, however, pushed vulnerability and dedication in the actor even further. As was discussed above, both Artaud and Grotowski saw theatre as a

way to tear off people's societal masks to get to the truth beneath them (Artaud 31; Grotowski 21-22). In order to achieve this, Artaud and Grotowski required their actors to do the same. While Artaud did not articulate specific techniques for doing this in his writings, Grotowski outlined a series of exercises intended to develop actors' discipline and strength (mental, emotional, and physical) and to strip away society's influence (Grotowski 133-204). Ultimately, Grotowski did not want to increase actors' skills, but to develop their fortitude, then strip back their layers of persona through a process called *via negativa* (16-17). Theoretically, this would leave actors completely vulnerable to their directors, work, and audiences.

This style of acting and actor training can be painful, but Artaud and Grotowski did not consider this a problem. In fact, both felt that acting – and theatre - should be uncomfortable - even painful - as this is the only way societal influence can be torn away and people can be confronted with deeper truths (Artaud 92; Grotowski 21-22). Beyond that, both men suggested that actors should be martyrs for their art, willingly throwing themselves into all requests from their directors and sacrificing themselves for their audience members (Artaud 24-25; Grotowski 33). Artaud and Grotowski even endorsed the idea that, “Actors should be like martyrs burnt alive, still signalling [sic] to us from their stakes” (Grotowski 125).

With the emotional and psychological components of psychophysical acting and the intensity of Artaud and Grotowski's approaches, some theorist/practitioners endorsed a return to physical methods, citing these as safer and/or more creative (Syssoyeva & Proudfit 57). Physical approaches have often been and continue to be employed in non-realistic forms of theatre, as well as collective creations. One of the newest physical

approaches is *Viewpoints*, created by Anne Bogart. This technique emerged from dance and plays with notions of time and space (Bogart & Landau 5). As with earlier physical techniques, Viewpoints does not give realistic access to the inner workings of characters' minds.

Viewpoints and many contemporary physical approaches re-shape the actor's role in theatre, moving it to the position of embodied creator. In this model, the actor is approached as one of a show's initiators rather than an employee who achieves another's vision (Bogart & Landau 18). A director still shapes the show, but it is built through a co-operative approach that values and fosters the creativity and artistic contributions of all involved (Bogart & Landau 18). The reason for this shift was that Bogart and others like her endorsed the idea of the empowered, spontaneous, innovative theatre artist/performer. By encouraging artists to bring an open mind to their work and create theatre that challenges normative notions of bodies, movement, space, and/or time, physical theatre theorist/practitioners believe that performance can pass these new ways of seeing on to audience members (Bogart & Landau 145-146, 159).

While the acting approaches outlined above demonstrate a number of differences in how actors have been perceived and the goals of acting, they also reveal a mostly shared sense of the power actors hold. Actors' work developed from forms of worship, and many theorist/practitioners have maintained a faith in the mystical element of acting (Kuritz 19). Throughout history, this mystical quality has contributed to a reverence for actors – and a fear of them. Both feelings, however, reveal a belief in the mystical side of acting. In the post-Stanislavsky era, actors' power has been increasingly defined. The humanity they bring to their work, the ritualistic elements they tap into, and the fact that

the work melds the quotidian and the theatrical have all been presented as components of actors' power. In spite of these explanations, theorist/practitioners have continued to see an indescribable element of mysticism woven into actors' work.

Conclusion to the Background of the Problem

In this section, I focused on providing a brief introduction to various approaches to theatre and acting. First, theatre as a whole was explored. I looked at several key theorist/practitioners, considering their goals for and styles of theatre, as well as the consequences they desired from their work. Next, approaches to acting were addressed. I briefly reviewed the history of acting and the role of the actor in several theorist/practitioners' theatres. Now, with this material laid out, I turn to the central problem explored in my research study.

Presentation of the Problem

Introduction to the Presentation of the Problem

While I continue to concentrate on acting in this section, I address present understandings of actors' lived experiences of representing human suffering, distress, and/or violence, as well as establish the problem I examine throughout my study. A look at the current state of academia and practice opens the section. As this is an introduction to the problem under consideration, only directly relevant theories are addressed. Research and theories surrounding or indirectly connected to my research are considered in Chapter 2. Once I lay out the current landscape of relevant academia and practice, I

establish the problem my work addresses. Unpacking these areas will assist in outlining both my study and the landscape surrounding it.

The Current State of Academia and Practice in Relation to This Problem

Prior to launching my study, I searched for academic and practice-based work already conducted in relation to actors' lived experiences of representing human suffering, distress, and/or violence. What I discovered was a distinct lack of information, industry awareness, published material, and primary research addressing this topic. There is currently no policy and little to no education or awareness through groups that oversee actors' work, such as the two English-language unions, ACTRA and Canadian Actor's Equity Association. Therefore, policy and education falls to individual companies, producers, directors, and training programs. As these individuals and organizations employ varied approaches that are generally not made public, it is difficult to speak precisely about the current landscape related to consequences actors may face when representing human suffering, distress, and/or violence. Discussing my study with industry professionals, however, has often elicited one of two types of response.

The first response, often provided by performers, has been extremely positive. Actors have frequently given examples of experiences they have had that would fall under the purview of the study or have shared information about their work that they wish was more widely understood in the industry and society at large. On the other hand, the second group of responses has included reluctance or even strong opposition toward the study. These responses have included concerns about whether the study seeks to impose a medical model onto actors, as the limited previous academic work related to

representations of human suffering, distress, and/or violence have often done. The strongest opposition, however, has generally come from non-performer industry professionals and been centred around the idea that actor's work is based in fiction and, therefore, any study would be irrelevant or even detrimental to the entertainment industry.

These notions have rarely been challenged as scholars have generally remained silent on the topic of actors' lived experiences of representing human suffering, distress, and/or violence. Instead, when considering the consequences and ethics of representation, academics have often focused on audience members' experiences. On the rare occasion actors' experiences are considered, professional actors working with material not based on their own life events do not receive the attention. For example, while Julie Salverson frequently addressed the ethics of representation, she focused on individuals with little to no experience, working in post-secondary or community theatre settings, and collectively creating shows based on their own past personal sufferings. In spite of the divide between her work and my study, Salverson offered up the idea that representations non-actors undertake and the ways in which these representations are approached can lead to a series of personal and interpersonal consequences (187). This idea supports the need to understand professional actors' lived experiences of representing human suffering, distress, and/or violence.

Australian scholar, Mark Seton's work further demonstrated the need for my study. He theorized about the impact on students when they represent human suffering, distress, and/or violence in post-secondary actor training environments. To gain insight into this topic, Seton observed a series of classes, seeking to discover "how acting

practices [can have an] impact on [students'] lives" ("Post-Dramatic' Stress" 1). This raises the important idea that the work acting students undertake should be considered in relation to how it can shape them as embodied persons (Seton, "Post-Dramatic' Stress" 1). Ultimately, however, Seton undermined an exploration of this shaping by moving directly to the conclusion that acting students in post-secondary programs experience "post-dramatic stress" and that experiencing trauma is an inherent part of acting ("Post-Dramatic' Stress" 1, 3). There are several issues with this conclusion and the manner in which it was achieved. These issues, however, do not just exist in Seton's work; but, rather, throughout theatre scholarship that has theorized about the lived experience of representing human suffering, distress, and/or violence.

The first issue that has consistently emerged is a lack of data. While theatre scholars have theorized about actors' experiences with these challenging representations, when I undertook my study, no one had yet conducted the primary research necessary to support such theories. Instead, theatre scholars simply based their arguments on their thoughts about what "should" be occurring and on research from other fields. Although studies have been undertaken in the field of psychology about the impact that listening to or engaging with stories of human suffering, distress, and/or violence can have on trauma workers, prior to my research, theatre scholars just co-opted and applied this research to performers and/or acting students without conducting any studies with actors – amateur or professional, theatre or film. While there may be some overlap in the issues and narratives encountered, actors are not trauma workers and it was premature to automatically suggest that research in other fields could directly transfer across contexts.

The second issue is that theatre scholars have too closely tied their work to trauma research and the medical model. Seton, whose theories have the strongest overlap to my study, framed his concern as “the enactment and witnessing of trauma in the context of rehearsal and subsequent performance” (“‘Post-Dramatic’ Stress” 2). He and several other scholars have taken the position that, if actors and/or acting students encounter personal costs in relation to their work, they must be experiencing trauma (Seton, “‘Post-Dramatic’ Stress” 3). Even Seton’s use of the term “post-dramatic stress” ties actors into a continuum with post-traumatic stress and, even, post-traumatic stress disorder (PTSD) (Seton, “‘Post-Dramatic’ Stress” 2). It is a serious assumption, however, to suggest that acting and trauma are inherently interwoven, especially as theatre scholars have done so without research support.

Given this - and my concerns with the medical model, which are addressed in chapter 5 – I did not use the language of trauma research in my study nor do I do so in this dissertation, except when speaking directly about vicarious trauma studies and literature. Similarly, I limit my employment of trauma research to background material and a means of comparison with my study. This material does not frame my study or my analysis of its three core themes. Rather, I use a phenomenological lens as the goal of my study is to explore actors’ lived experiences rather than immediately frame them as a medical concern.

The third and final issue with current scholarship regarding representing human suffering, distress, and/or violence is that academics theorizing about this area have generally avoided looking at professional actors’ experiences, focusing instead on training, community projects, and/or specific acting systems. Although training and

community projects are important to address, professional actors need to be studied separately as the expectations, demands, and goals of their work are unique. In addition, the level of experience professional actors bring to their work is often much higher than that of students or non-actors participating in community projects. Scholars have also tended to concentrate on a single acting system – often Strasberg’s Method, which does not reflect the experiences of most professional actors, who bring a variety of techniques and approaches to their work.

Being inspired by and learning from other fields is important, especially in this age of interdisciplinary scholarship, but it is not enough to simply borrow from those fields without question or critique. Theatre and acting scholarship needs to include primary research into the lived experiences of representing human suffering, distress, and/or violence so its academics can fully engage in interdisciplinary discussions about vulnerability, resilience, and workplace ethics. More importantly, what can scholars offer entertainment professionals if assumptions are made about artists’ experiences and the artists are neither studied nor given the opportunity to speak? If theatre scholars wish to truly engage with practice and participate in interdisciplinary conversations, they cannot ignore the value of research in favour of simply hypothesizing about what they believe might be happening in the theatre industry. Similarly, to gain a full understanding of community theatre and actor training, scholarship needs to include primary research studies into these areas. These studies need to allow the individuals engaging in community theatre and/or actor training to express their own experiences, rather than scholars interpreting those experiences in service of theories they already hold.

The Current State of Practice in Relation to This Problem

If actors are experiencing personal consequences related to their work, why is this not being discussed more often and more openly? I have often been asked this question in relation to my research. There are numerous reasons actors may not be open about personal costs related to their work. Some of these reasons were raised above, in relation to the discussions I had with my colleagues. I will, however, offer up three more possibilities here.

First, most actors may not be experiencing high personal costs or these costs may not be sufficiently distressing to be worth mentioning. Research in other fields has identified a range of factors related to each individual's ability to give meaning to emotionally challenging situations or material. Some people may have enough support to avoid experiencing distress related to the personal costs of their work (Flannery 608). Others may have personality traits that allow them to be more resilient in general or in relation to specific issues (Briere & Scott 14). While individuals in these two groups could feel overwhelmed at times, they would be less vulnerable than others to prolonged distress and to having their beliefs about the world fundamentally shaken. It is possible that the majority of professional actors tend to belong to one of these two groups and can move quickly through any personal costs that arise.

Second, it is possible that actors are encountering personal costs but that they move on to their next workplace before these consequences manifest or before co-workers notice them. The average length of an acting contract in Canada remains short - and researchers in other fields have suggested that people may have a latency period prior to developing an emotional response to challenging material (Caruth 181). Therefore,

actors could be completing their shows before personal costs emerge and, when these costs later arise, staying silent about them as they do not seem relevant to the current workplace.

Third, actors may be experiencing personal costs but feeling unable or unwilling to speak openly about them. This could be because the acting profession is currently structured in a way that does not allow for or encourage individuals to discuss such experiences. Even when an actor or other members of the cast or crew notice and recognize what is happening, they may not say anything if personal costs related to the work are an open secret within the industry.

Like workers in several other fields, actors may hide any personal costs, thinking that there is something wrong with them or that other people will not understand (Bryant-Davis 61). This could result in actors who encounter costs related to their work moving into other types of theatre (ie. pieces that do not include narratives of suffering, distress, and/or violence), moving into other performance arenas (ie. hosting television shows), or leaving performing altogether. Actors who take one of these three routes may never speak up about the experiences that contributed to their decisions to change genres, shift into other arenas, or leave the industry.

There is, however, another alternative: actors may simply not be experiencing personal costs related to their work. They may not have the level of response to narratives and/or images of suffering, distress, and/or violence that is seen in other professionals, such as therapists, social workers, and police officers. Perhaps actors do not encounter these narratives and/or images in the same way as individuals in the professions that have already been studied. If this is the case, however, what is it that enables actors to bypass

the personal costs that have been seen in other professionals who engage with narratives and/or images of human suffering, distress, and/or violence?

There are some entertainment professionals, often those who have opposed my study, who believe any personal costs actors may experience related to their work are irrelevant. These professionals ask why creative teams should bear any responsibility in relation to the actors they hire. This question is generally based in the argument that actors should not accept jobs they feel would carry too high a personal cost. After all, actors are not forced to participate in any given project; they choose to be involved. This argument, however, relies on a few assumptions. One is that actors have the financial freedom to pick and choose their work, which is not always the case. Another assumption is that people can always accurately judge, even prior to starting a project, what tax it will exact from them. This has not been researched in relation to acting; but studies in other fields have actually supported the opposite position, suggesting that personal costs can arise unexpectedly (Yehuda et al. 1311). My study will shed light on whether performers experience a similar situation.

Even if actors went into a show aware of the costs that could occur, it would be problematic to declare that they should bear the sole responsibility for managing these costs. That approach would not be considered acceptable for other professionals. Theatre artists are often hired as contract employees, and, thus, may not be entitled to the same benefits as full-time employees; however, ensuring employees' health and wellbeing should be a key component of all workplaces. Even in contract work environments, including theatres, there are safety precautions in place to ensure workers' physical safety

(Safety Guidelines for the Live Performance Industry in Ontario 1). Overall wellbeing is equally important and deserves the same level of consideration.

Before this level of consideration can be achieved, research into actors' lived experiences of representing human suffering, distress, and/or violence is required. Theatre scholars and practitioners need to accept that the industry does not have information about whether professional actors - with or without past personal encounters with suffering, distress, and/or violence - may experience personal costs related to their work. Scholars have offered ideas about what could support actors' health and wellbeing; but, these ideas are being offered blindly, without an awareness of whether or not actors need support, let alone what type of support would be of assistance. Similarly, practitioners are making choices every day in rehearsal and performance spaces that could influence actors' lived experiences in relation to these representations, but without the knowledge necessary to analyze the potential consequences related to these choices. Finally, actors are making decisions about how they engage with themselves, their co-workers, and others without having research to draw information from, leaving each individual to discover his/her own path – or have none at all.

Conclusion to the Presentation of the Problem

In both theatre scholarship and practice, there have been numerous theories put forward and assumptions made about what actors' lived experiences of representing human suffering, distress, and/or violence are or might be. These theories and assumptions have been the focus of this section. First, the current states of academia and practice in relation to the problem my study addresses were explored. Following that, the

problem itself was considered. Together, these sub-sections have helped define both the core of my research and the field surrounding it.

Conclusion to Chapter 1

In this chapter, I introduced the present study, explained how it came into being, and explored the current state of academia and practice related to actors' lived experiences of representing human suffering, distress, and/or violence. The chapter began with a look at the personal journey that led me to my work. From there, I provided background information regarding the role of theatre in society and the role of the actor in the theatre. The final section wrapped up the chapter with an examination of my study's central problem. The current state of both academia and practice in relation to the problem were established and the problem was discussed in-depth. The material covered here will be built upon in the next chapter, which considers key terms and literature.

CHAPTER 2. THEORY

Introduction to Chapter 2

In this chapter, I address literature from the four major fields connected to my study: phenomenology, ethics, theatre, and vicarious trauma studies. I start with a presentation of my theoretical framing. Here, I discuss each of the four fields I have chosen, explaining why I selected them and what they offer my work. This is followed with a terminology section. In it, one relevant key term from each of the four fields is discussed. I present a brief history of each term to provide an understanding of the complex ideas contained within them. Finally, I conduct a literature review proper, where I explore the fields of phenomenology, ethics, theatre, and vicarious trauma studies. Although each offers a wide variety of research and theory, my review only looks at material relevant to my study.

Presentation of the Theoretical Framing

Deciding on a theoretical framing was important as I knew the choice would profoundly shape both my study. Selecting phenomenology was challenging as I knew, in addition to being part of my theoretical framing, it would also define my study's methodology. In addition, the lack of primary research in relation to actors' lived experiences of representing human suffering, distress, and/or violence meant there was no closely related material to look to for inspiration or guidance regarding my methodology. I ultimately chose phenomenology as it allowed for qualitative exploration of the meanings performers assign to their lived experiences and enhanced

understandings of the subjective and intersubjective relevance of representations of human suffering, violence, and distress to the actors performing them.

In contrast to the challenge of selecting phenomenology, the field of ethics has been linked to my study since its inception. After all, my study emerged from the concept that it is important to understand actors' experiences and what – if anything – can be done to better support actors in their work. At the core of this concept is the idea that we should care about our own and others' experiences and wellbeing. Thus, ethics was an obvious choice to add to my theoretical framing.

Theatre theory was another obvious addition, as it would be difficult, if not impossible, to study actors' lived experiences without drawing on it. In fact, I have already referenced theatre theory several times in order to simply outline the role of theatre in society; the place of the actor in theatre; and the current academic landscape regarding the personal costs of representing human suffering, distress, and/or violence. Despite this, theatre theory does not play the primary role phenomenology and ethics do in my work. Instead, I draw on it for literature and information throughout my dissertation.

Vicarious trauma studies is another field I came to early in my work. After questioning Christian Bale's experience of shooting *American Psycho*, I began hunting for theatre scholarship that might give me the answers I was seeking. When I was unable to find any directly relevant research, I moved on to scholarship in other fields, discovering vicarious trauma studies. While not directly applicable to theatre, vicarious trauma studies has opened up opportunities for dialogue about actors' lived experiences when representing human suffering, distress, and/or violence. This is not unusual as

vicarious trauma studies has introduced the idea that employees can face deep personal costs when working with narratives or images of human suffering, distress, and/or violence to a number of academic fields and professions, inspiring numerous research studies, including my own. Vicarious trauma studies indicated to me that research concentrating on actors and their lived experiences of representing human suffering, distress, and/or violence could be valuable. Now, I continue to use vicarious trauma studies throughout my dissertation as a means of comparison with my research.

Terminology

Introduction to Terminology

With my central fields introduced, there are four key terms that require some elaboration before I move on to my literature review. Therefore, in this section, I examine the terms: *lived experience*, *ethics*, *witnessing*, and *trauma*. I explore these terms for several reasons. To start, they are all relevant to my study. Each one is also complex, having been discussed and debated, defined and redefined. Even in the fields they emerged from, there is dissent about these terms' meanings.

In addition, each term is connected to two or more of my four primary fields of phenomenology, ethics, theatre theory, and vicarious trauma studies. This crossover speaks to the recent rise in interdisciplinary scholarship and the important research it has made possible. While interdisciplinary scholarship opens up innovative areas of research, it can also lead to situations where academics employ terms from other fields without having a full awareness of the associated history or meaning. Within theatre theory, this has occurred with the terms *lived experience*, *ethics*, *witnessing*, and *trauma*. Given the

multiple, shifting, and/or unclear meanings these terms have taken on in theatre scholarship, I believe it is important to establish working definitions for each one. In order to accomplish this, I spend the next sub-section examining each term, including its history and current positioning.

Lived Experience

Phenomenology is fundamentally interwoven with the idea of lived experience. Given this, it is important to address the history and understandings of the term *lived experience* both to have an awareness of it and of the surrounding theoretical field. When exploring the term, however, it quickly becomes clear how difficult it can be to define. Perhaps then it is best to start by looking separately at the words *lived* and *experience*.

Within phenomenology, the notion of living is tied to subjective experience, as well as the intersubjective relationship between the self and the world (Tymieniecka 109). In our quotidian realities, we think, feel, and encounter through our body/minds (Merleau-Ponty, *Phenomenology* 235) – a set of processes that, together, can be seen as making up the lived component of the term *lived experience*. The second component – experience - is one Max van Manen introduced, while drawing on Hans-Georg Gadamer's writings. Both men presented the idea of experience as the shaping of an encounter into a unified whole (van Manen 37). Thus, the term *lived experience* may be understood as the taking of subjective experiences of existing in the world and shaping these into meaningful units, often to discuss them or give them meaning.

Already, the temporal aspect of lived experience can be seen. For a lived experience to occur, one must first live through an event. In that moment, however, the

event cannot be reflected on as a unified whole (van Manen 37). Only once the encounter has been completed is it possible to look back at it. When an individual considers such an encounter in retrospect, discovering themes and ideas within it, a lived experience is formed (van Manen 37). Paradoxically then, the nature of a lived experience being tied to looking back over an event means it will never contain the richness of the original event itself (van Manen 36).

Lived experiences may not contain this richness, but they do offer up new understandings of events. More than that, they are vital to understandings of the self and the world as they are the way we “assign meaning to the phenomena of lived life” (van Manen, *Phenomenology* 37). Maurice Merleau-Ponty dug into this idea, claiming that the world can never be understood solely through the senses (*Phenomenology* 34). It is only by shaping our lived experiences and returning to them in the present that we can make sense of what we see, hear, taste, touch, smell, and feel in the moment (Merleau-Ponty, *Phenomenology* 34). Given this, the shaping of lived experiences can be seen as an integral part of ourselves as beings. In fact, Wilhelm Dilthey even presented lived experience as the breath of our emotional lives (59).

Ethics

Teasing out a definition of *ethics* is a complicated task as the term has served numerous masters over its long history. The term *ethics* can be found in many areas of society, fulfilling a variety of purposes. For example, *ethics* has been used as a term in day-to-day conversation, as an academic sub-discipline of philosophy, as a theoretical framework, and as a “buzzword”. In addition, academic disciplines where the term

appears often maintain multiple definitions of it. It is no wonder then that Henry Sidgwick stated, “[t]he boundaries of the study called Ethics are variously and often vaguely conceived” (1).

Examining writings from established ethicists, including Emmanuel Levinas, Jacques Derrida, and Alain Badiou, two core understandings of the term in question emerge. The first is consistent with ancient Greek thought on the topic (Badiou 1). When the ancient Greek philosopher Plato considered the concept of ethics, he argued that it addresses two questions. The first was how someone should live (Irwin 3). The second was how someone could know how s/he should live (Irwin 3). Plato worked to create a system of thought that would allow people to think out the answers to these questions. Thus, the definition of *ethics* that is in line with ancient Greek understandings of the term is as a way to seek out the “right” or “good” (Badiou 1; Sidgwick 2).

Another core understanding of *ethics* is closely linked to the work of Levinas and Derrida. This definition is based less in creating a way to decide or know what is right, instead focusing on the other (Levinas, *Entre Nous* 103; Derrida, *Ethics* ix). As Levinas explained, ethics is fundamentally linked to the “taking upon oneself ... the fate of the other” (*Entre Nous* 103). In this understanding, the central question becomes whether the focus should remain on finding shared human elements or navigating the differences between the self and the other. Many theatre scholars have promoted Levinas and Derrida, allowing their work and this second understanding of ethics to come to the forefront in theatre theory.

For the purpose of my study, I will combine the two definitions presented above for the term *ethics*, combining the intellectual system of the first with the care and

compassion for the other of the second. When these definitions are brought together, *ethics* can be viewed as a way of understanding how we ought to behave toward the other, given the responsibility owed to him/her. With this interpretation in place, I further discuss ethics as a field of study below, in my literature review.

Witnessing

As with *ethics*, the term *witnessing* has been incorporated into a variety of fields, resulting in shifting definitions and understandings. When these understandings are examined more closely, however, there are three central elements that consistently arise: the event, the witness, and the relationship between the two. By discussing these elements, I seek to build a core understanding of the term *witnessing*. Although the ideas contained in this discussion are also connected to larger theoretical concepts in relation to witnessing, my focus in this sub-section remains on how the term has been defined and understood. I then address the larger concepts related to witnessing scholarship later in this chapter, in the theatre theory portion of my literature review.

The first element that consistently emerges in definitions of the term *witnessing* is the idea that an event must occur. It is not possible to witness what is not happening. An event that is seen, however, can imply or indicate another that is not. In addition, an event may be someone speaking about a previous experience. In this case, what is being witnessed is the person telling his/her story.

While an event is needed, it alone is not enough for witnessing to occur. A second component is required, the witness. This individual (for the sake of this study, only human witnesses will be discussed) has to give attention to the event s/he is observing

(Adler 142). The nature of the attention is equally important. Numerous theorists have raised the idea that the witness must choose to provide focused and sustained attention to the event being witnessed. In order to do this, however, the witness must be outside the situation itself. This concept is supported by a variety of theorists, who have argued that a witness needs to function as an outside eye (Felman & Laub 58).

The two elements discussed thus far - the event and the outside individual who gives it attention - work together to form the core of observation. Observation, though, is not enough for witnessing to occur. In addition to observation, the witness provides recognition of what they observe and takes it on, being able to testify or communicate about it (Oliver 90). This taking on of and further communicating about the event are, to many theorists, the core of witnessing.

The taking on of an event, however, creates a paradox. While, as was discussed above, the witness comes into the situation as an outside eye, the process of witnessing creates an intimate, emotional bond between the witness and those being witnessed for (Felman & Laub 58). Shoshana Felman and Dori Laub spoke to this directly, suggesting that the witness both feels the pain of the situation's victims and yet still functions somewhat as an outside eye since s/he is not directly involved (58). A paradox, thus, emerges as the witness must develop an empathic connection with those s/he is witnessing for, but doing so can eliminate the distance necessary to remain outside the situation and function as its witness.

By breaking down the elements that consistently appear in discussions of the term *witnessing*, it becomes clear that witnessing is the process of an individual giving sustained attention to a situation in such a way that s/he becomes simultaneously

emotionally connected with and separate from those being witnessed for. This definition points to the important role of the witness. It is not always possible to testify about a situation when one is or was actively involved in it. On the other hand, it can be easy for some to dismiss or disengage from the emotions emerging from individuals who are not or were not directly involved in the situation. Witnessing, however, can allow for someone to exist in a liminal space with enough distance to speak and enough connection to be heard.

Trauma

Like *ethics*, the term *trauma* has a history that extends back to ancient Greece and a definition that has been widely debated by two major scholarly camps. One group of scholars has limited the use of the word *trauma* to an overwhelming event experienced by an individual (Briere & Scott 3). The opposing camp has extended the term to cover both overwhelming events and people's reactions to them (Briere & Scott 3).

John Briere and Catherine Scott's work epitomizes the position of the first scholarly camp. Briere and Scott summarized this position, stating:

Often, trauma is used to refer both to negative events that produce distress and to the distress itself. Technically, "trauma" refers only to the event, not the reaction, and should be reserved for major events that are psychologically overwhelming for an individual. (3)

This argument is based in the earliest understandings of trauma that arose in ancient Greece. The term *trauma* emerged from an ancient Greek word used to describe soldiers' injuries after their armour was pierced (Spiers 213). *Trauma*, however, was originally

only used to describe the event that caused the injury, not the injury itself (Spiers 213). The term was also restricted to physical injury (Spiers 213).

In the nineteenth century, this started to change. Physicians were beginning to study whether emotional and mental distress could lead to the development of physical symptoms (Spiers 215). This early research led to Sigmund Freud's and Joseph Breuer's work on hysteria and to Freud's continued research into psychological trauma (Spiers 216). Further studies into psychological trauma were undertaken when soldiers in World Wars I and II showed signs of emotional distress after returning home (van der Kolk 6). With this move from the physical to the psychological came a shift from understanding *trauma* as an event to seeing it as both that event and the ramifications of it (van der Kolk 6).

Today, there continues to be a camp of scholars who apply the term *trauma* to both events and the psychological implications of them. Lisa McCann and Laurie Anne Pearlman addressed this understanding in their definition of a traumatic event as one that is, "sudden, unexpected, or non-normative ... exceeds the individual's perceived ability to meet its demands, and ... disrupts the individual's frame of reference and other central psychological needs and related schemas" (10). Most other contemporary trauma and vicarious trauma scholars support a similar definition of trauma that takes into account both initial events and the psychological implications of them. Rather than struggle against this predominate definition, I have chosen to work with it, allowing for smoother integration between my study and contemporary vicarious trauma research.

Conclusion to Terminology

Over the course of this section, definitions of the terms *lived experience*, *ethics*, *witnessing*, and *trauma* have been discussed and, in each case, I have decided on a definition for the purposes of my study. These definitions become increasingly relevant as I move through my literature review. While a specific definition has been put forward in relation to each term, the intention is not to promote these as the singular or “best” definitions, but to encapsulate the terms and their history in the strongest manner for my study and the research material I draw from in this dissertation.

Literature Review

Introduction to Literature Review

Although it is imperative to consider term’s definitions and histories, it is equally important to give the same level of attention to fields of scholarly literature. Therefore, in this section, I explore the four fields that are central to my research: phenomenology, ethics, theatre theory, and vicarious trauma studies. Key ideas and theorists are outlined and addressed. Although the fields themselves are being reviewed, my focus remains on material that is relevant to my study. Connections between the literature and my work, however, will not be explored until chapter 5. In addition, while I may note questions I have in relation to some concepts, I limit my comments on the theories in this section. Rather, I present the relevant data so I can then consider it in relation to my study’s three core themes in chapter 5.

Phenomenology

It is difficult to explore the central concepts of phenomenology without discussing the relationship between the self and the world. Many theorists and philosophers in the field have studied this topic, leading to a consensus that the two elements should not be considered as separate, but rather, need to be understood as fundamentally woven together. Given this, and its central role in phenomenology, I will now consider the relationship between the self and the world.

Martin Heidegger was one of the first theorists to address this topic, suggesting that the relation between the self and the world could best be described through the term *Being-in-the-World* (Heidegger 85-86). According to Heidegger, the self (Being) and the non-self (World) are embedded within one another as each can only be experienced through the other (85-86). The first half of this idea is based in the position that Being can only be understood as part of the World since we do not have a concept of Being that exists independently from the World (Heidegger 85-86). As people, we are not able to imagine ourselves in a void; and, thus, our very concept of self is tied to the existence around us. Even our knowledge of what constitutes self is defined by experiencing the non-self or the other – in this case, the World (Heidegger 85-86). The second half of Heidegger's approach is grounded in the fact that we can only engage with the World through our senses (Heidegger 85-86). Thus, we can only understand the World through the self or Being. Bringing the two halves together leads to Heidegger's conclusion that we can only process the World through the Being and the Being through the World (85-86).

While this idea, when considered in isolation, could seem to be little more than an interesting philosophical exercise, it actually provides the basis for another important concept in phenomenology: seeing the subjective and intersubjective as the basis for human experience and understanding. Phenomenology suggests that there is no objective reality that we can identify, as we have no way of engaging with or understanding such a thing (Bullington 20). Although there may be no objective reality we have access to, what we do have, according to phenomenologists, is our subjective lived experience (Bullington 20). In addition, when these subjective experiences are shared by several beings, we have access to intersubjective experience and understandings (Tymieniecka 109).

Merleau-Ponty considered this notion of subjectivity being the basis of our understanding when he considered the example of a cube. Considering the experience of looking at a cube, Merleau-Ponty stated that: “The cube with six equal sides is not only invisible, but inconceivable; it is the cube as it would be for itself” (*Phenomenology* 237). Even if one were to look at one side of the cube, then another, and another, it still would not be possible to understand the cube as a whole, as the viewing of each side would be chronological rather than simultaneous. Although it is feasible to create the mental image of the cube as a whole, this would be an intellectual piecing together of the elements seen at different points and would never be a reflection of the cube as experienced by itself (Merleau-Ponty, *Phenomenology* 237). Beyond that, even if it were possible to see all sides at once, one would still not have access to the areas and elements of the cube that cannot be sensed by a human being (Merleau-Ponty, *Phenomenology* 236). Thus, our subjectivity frames both our experiences and our understandings (Rogers 44). At the

same time, even our most private experiences in the world of perception are not encountered in isolation, as there is always the interconnectedness of the self and the other – the intersubjective (Merleau-Ponty, *Phenomenology* xxii).

Memory - another area of interest for Merleau-Ponty - has obvious connections to both subjectivity and intersubjectivity. In mainstream culture, it is common for memory to be presented as an objective process – either an accurate or inaccurate view of the past. This positions memory as a reflection of the past divorced from the present. That positioning, however, is destabilized by phenomenology as memories can solely be stored or accessed through the self in the present, the place in which all time is wrapped up and grasped (Merleau-Ponty, *Phenomenology* 80). As Merleau-Ponty explained, the way we understand memories and even what memories or parts of memories we remember at any given moment is linked to what is occurring in the present (*Phenomenology* 22-23). Thus, memory is always a ghost that is framed by our own subjectivity, as well as by present events and situations, which bring intersubjectivity into play. As with the cube, then a memory can only ever reveal a partial, subjective and intersubjective view of an experience (Merleau-Ponty, *Phenomenology* 43).

The concept of subjectivity has been brought into theatre theory through the interdisciplinary work of scholars like Bert States. States combined phenomenology and theatre theory to explore the actor's lived experiences while in character. He suggested that the actor must find a way to pump life into the text while, at the same time, surrendering and allowing himself/herself to be used by it (States 127-128). To do this, States argued that the actor needs to build and exist in a liminal space (127). He wrote that, "in becoming Hamlet or Juliet the actor throws himself into the gap between the

hypothetical and the real” (States 127). It is only by encountering this liminal space that the actor can communicate the fiction without becoming lost in it. Thus, for States, there is always a tension between the actor and the character, the quotidian world and the fictional one (127-128). If this argument were extended, it would seem to suggest that the actor encounters a liminal lived experience that incorporates the responses of both self and character simultaneously.

Another phenomenological concept that has been employed within theatre theory is the relationship between the mind and the body. Western society has long been dominated by Cartesian dualism (Yardley 42) and its central tenant of there being a separation between the body and the mind (Yardley 34). This, however, has been strongly opposed by phenomenologists, especially Merleau-Ponty (Zarrilli, “Toward a phenomenological” 654). As with the self and the world, phenomenologists have suggested that the mind and the body are interwoven as each relies on information and framing provided by the other (Merleau-Ponty, *Phenomenology* 235). After all, our only way of engaging with the world is through our senses; and, therefore, the material that enters our minds comes through our bodies (Merleau-Ponty, *Phenomenology* 235). At the same time, our notions of what constitutes the body and how it functions are shaped by the mind (Merleau-Ponty, *Phenomenology* 235). Given this, Merleau-Ponty argued for the importance of approaching the self through the concept of the body/mind (*Phenomenology* 235).

Using this as his framework, Phillip B. Zarrilli considered how specialized training systems, such as those used by actors, can counter the continued influence of Cartesian Dualism. He suggested that individuals have multiple bodies that they engage

with throughout their lives (Zarrilli, *Psychophysical Acting* 52). In quotidian situations, Zarrilli argued that individuals generally engage with their surface bodies, which allow for basic social interactions, and their visceral bodies, which control things like the cardiovascular and respiratory systems (“Toward a phenomenological” 658). Within Western culture, the surface and the visceral are often approached as being bodies separate from individuals’ minds. In addition, these bodies frequently disappear from quotidian consciousness, only being noticed when they are disrupted (Zarrilli, *Psychophysical Acting* 51). This disruption can take the form of pain or illness, but it can also emerge from what Zarrilli dubbed the *aesthetic inner bodymind* (*Psychophysical Acting* 55).

This bodymind is developed through long-term training, including actor training. Through this training and the development of the aesthetic inner bodymind, the actor is able to challenge the dualist approach that exists in relation to the surface and visceral bodies, shifting to the idea of body-in-mind and mind-in-body (Zarrilli, “Toward a phenomenological” 661). According to Zarrilli, this shifting then allows actors to approach their surface and visceral selves as bodyminds, developing additional awareness of and control over them (“Toward a phenomenological” 662). This control opens the door to Zarrilli’s final bodymind - the *aesthetic outer*. Made up of a set score of actions, this bodymind is used in performance to allow audience members to read the actor as his/her character (Zarrilli, “Toward a phenomenological” 664).

Phenomenology offers my study important insights into concepts such as: Being-in-the-World, subjectivity and intersubjectivity, and the body/mind. In addition to these and other theories, phenomenology also provided me with my research methodology,

which I address in chapter 3. I then return to the principles I laid out in this sub-section in chapter 5, applying them to the three core themes that were identified in my study.

Ethics

Although I have already established a definition for the term *ethics*, there are three criteria required for ethics to become relevant that I have not yet discussed. These criteria were originated by Henry Sidwick, but have been built upon by other ethicists. The first criterion is choice (Sidwick 56-57). Ethics is based in creating a system of thought to allow each individual to think through and decide what is right or good in a given situation (Ezigbo 232). Therefore, if an individual has no choice, there is no space for ethics; s/he must simply follow the only available path. The second criterion is that some choices are seen as “fairer” or more “just” than others (Sidwick 208). If all choices are considered equally just, then, again, there is no reason to engage with ethics. The third and final criterion is that the individual wishes to make the most right or just decision and is striving to do so (Sidwick 2).

This third criterion is at the heart of ethical theories. For many theorists throughout history, the idea that people would seek the good, right, or just seemed to be relatively uncomplicated as it was linked to a belief in a higher power. As these theorists themselves generally came at their work from a strong religious and/or spiritual background, the concept that people would want to do good generally remained secondary to discussing the process of *how* to do good. For instance, although Levinas suggested that religion blocks an ethical relationship, he still supported the idea of a given good (Simmons & Wood 100). His own religious background can also be clearly

seen within the given good he presented, which is strongly based in the tenants of Judaism (Critchley & Bernasconi 34). Even within secular ethical theories, there is the inherent idea that people are invested in pursuing the good. For example, while Badiou worked from a secular position and did not explicitly state that individuals are interested in searching for the good, the idea remained as central to his arguments as it had for ethicists building their theories on a religious base.

The assumption that people strive to find and enact the good could emerge from the fact that, if people do not care about the impact their choices will have on others, there would seem to be little need for or engagement with ethics. This would also suggest that ethicists, who have generally dedicated their lives to studying the impact choices can have on others, came to their work with an established belief in the importance of the good. Therefore, it is possible that ethicists have had a blind spot to themselves and their fellow scholars assuming a base interest in the good.

While there has been a general assumption amongst theorists in the field about the need to seek the good through ethics and the fact that most people have a desire to look for that good, what is considered good has not remained constant. Choices seen as more just or right are not often universally understood this way because the good is based in historical and social contexts (de Waal 36). As Frans de Waal stated, “Human morality shares with language that it is far too complex to be learned through trial and error, and far too variable to be genetically programmed” (36). He suggested that we are born with a moral ability, similar to language ability, which then allows us to learn the morals of our culture(s) (de Waal 36). This understanding explains how there can be a shared concept of what is ethical within a culture, while there is so much disagreement amongst cultures.

Even within cultures there may be dissention as sub-cultures, groups, and/or individuals develop their own understandings of the good. Thus, the good cannot be understood apart from cultural and historical context (de Waal 36).

Although ethicists' generally have spoken in relation to understandings of the good within their own cultures, there is still a major divide in the field between those who believed that ethics need to be structured in relation to each situation and those who saw ethics as a set of defined principles that can guide people to an absolute good. The first approach is based in flexibility, with scholars having argued that what is considered ethical must be tailored to each situation (Fletcher 5). Followers of this approach are encouraged to consider what the most loving act would be in any given situation and to undertake to achieve this act, even if it is lying or killing (Fletcher 5). Built into this theory is the principle that if the end is deemed ethical, the means to reach it must also be (Fletcher 5). The second approach, however, is based in rules or commandments, which are always to be followed (Brink 14). Scholars based in this approach have promoted that there are choices, such as murder, that are always wrong and through which the good cannot be achieved (Brink 20). They have suggested that if an unethical action is undertaken, nothing that emerges from it can be considered ethical as it was brought about through means that breached the responsibility between the self and the other (Brink 20).

The relationship with the other is central to ethics. After all, the search for what is just and fair is fundamentally linked to how we perceive and behave toward others. While each theory of ethics includes a discussion of the other, scholars have presented a variety of understandings regarding the most ethical relationship with that other. For some, the

relationship is one of responsibility and a giving over of self (Rainsford & Woods 96). This idea can be traced as far back as Plato, who argued that short-term personal happiness should not take priority over taking care of the other, and that long-term happiness is based in treating the other in a just, fair way (Irwin 192-193). Levinas continued in this vein, suggesting that each individual owes a responsibility, “subjugation, vulnerability, and passivity [to] the other” (Rainsford & Woods 96) and that loving oneself can only come through loving another (*Entre Nous* 20). For both these scholars, the only way to grow, find openness, and fulfill oneself is through focusing on the way we approach the other. Where there is openness and vulnerability, however, there is also always the potential for misrecognition or misunderstanding (Levinas, *The Levinas Reader* 109). According to scholars in this vein, individuals are responsible for continuing to remain open and accountable to the other, even though they continually run this risk of miscommunication (Levinas, *The Levinas Reader* 109).

Derrida countered these arguments, leading the way to a new understanding of the relationship with the other. He and those who have built on his work suggested that the goal is not to lose ourselves in the other, but to see and reserve space for our ever present differences (Derrida, *Writing and Difference* 128). In fact, Derrida argued that trying to eradicate the space between the self and the other is a form of violence as it turns the other into an alter ego for the self (*Writing and Difference* 128). Instead, he believed, there must always be a divide between the self and the other, and ethics should focus on how this divide is navigated (Derrida, *Writing and Difference* 128). According to this approach, the way to create an ethical relationship with the other is to try to recognize and acknowledge similarity with the self, while reserving a space for irreducible

difference (Derrida, *Writing and Difference* 128). Balance becomes central then, especially to Derrida's work, where being is marked by presence and absence, similarity and difference, and ethics is engaged in finding the middle ground between seemingly endless strings of opposites (*Writing and Difference* 292-293).

For Badiou, as with Derrida, it was vital that people be respected for their own opinions, their similarities, and their differences. Like Derrida, Badiou suggested that it is not enough to accept the other on the condition that s/he becomes the self (85). At the same time, he argued that the other should not be turned into the absolute other, being reduced simply to his/her differences with the self (Badiou 85). Instead, the middle path must be chosen, allowing the other is viewed as both similar and different at all times (Badiou 85).

At this point, Badiou diverged from Derrida, presenting a radically different view of the world. While Levinas and Derrida – and many other ethicists – have stated that the world is fundamentally good, Badiou believed that it is actually neutral, existing below good and evil (85). From this point, Badiou continued on his separate path, arguing for the importance of secular ethics, as well as for situational rather than absolute ethics (Hughes 6). Both these arguments mark a major divide between Badiou's approach and Derrida's philosophy.

In service of his situational approach, Badiou focused much of his attention on how to judge what the ethical course of action is in any given circumstance. He presented ethics not as a singular decision but as a life-long commitment, a dedication of self to examining each available path and deciding on the most just course of action (Badiou 91). He did not, however, claim to be able to identify for others what is or is not just.

There is no how-to guide for ethics in his approach, nor is there a promise that acting in an ethical manner will lead to the world becoming good. The only guidelines and encouragement Badiou gave was that his readers build their “resources of discernment (do not fall for simulacra), of courage (do not give up), and of moderation (do not get carried away to the extremes of Totality)” (91). He also stated the importance of engaging in each given circumstance, deciding on the most ethical course of action, undertaking it, and then moving on to the next challenge (Hughes 6). Badiou acknowledged, however, that when looking back on situations, individuals might not ultimately feel they made the most ethical choice (Badiou 91). In these cases, he suggested that, more important than any single decision, is remaining dedicated to keeping on going, keeping on caring about and thinking about ethics (Badiou 91). This idea is important as it speaks to the underlying need to continue considering, researching, and discussing ethics and ethical concerns.

Theatre Theory

As basic understandings of theatre and acting were introduced in chapter 1, in this sub-section, I focus on theatre that includes representations of human suffering, distress, and/or violence. Representing human suffering, distress, and/or violence has generally been seen as a positive activity for societies (Mapp & Koch 100). In fact, Linda Winn argued that people and communities have a deep need to use drama as a means of addressing human suffering, distress, and/or violence (xii). These representations provide an additional outlet for people to explore pain, suffering, distress, and/or violence together, moving beyond simply discussing it with one another (Winn 97). Unlike such

discussions, where people must try to understand others mostly through explanation and/or argument, theatre offers the opportunity to show, tell, and feel. Since it is often based in narrative and representing characters' experiences, even when people disagree with a representation, theatre can open up a space for compassion, discussion, and/or debate (Winn 97). Thus, especially when working in tandem with other means of expression such as discussions, writings, and lectures, theatre can provide individuals and societies with an opportunity to pay tribute to issues and/or engage with emotions that may arise when encountering human suffering, distress, and/or violence (Winn 59).

Throughout her work, Winn positioned theatre as a form of witnessing (xiii). This is not an uncommon position. In fact, many scholars have suggested that theatre can be highly affective (Boydell 201), allowing for and encouraging moments of witnessing (Salverson 188; Weine 168; Winn xiii). This makes sense given the range of opportunities the theatre offers to encounter, communicate, and feel for and with others. It also makes sense that representations of human suffering, distress, and/or violence will remain a central part of theatre for the foreseeable future.

Witnessing, both internally for the self and externally for the other, has been marked as important by many scholars over the years. In fact, Kelly Oliver declared witnessing to be vital, stating that having a story which cannot be seen, heard, and witnessed for constitutes a form of death (90). Witnessing, however, is a complex process. Stevan M. Weine argued that, in fact, to witness involves more than just giving attention and understanding to a single moment in history or an individual's life (169). According to him,

Witnessing ... also includes the life that was shattered and the life of the survivor ... The witness receives, processes, and transmits survivors' knowledge. Most important, witnessing strives to be consequential--for the witness, the individual survivor, the collective of survivors, and other witnesses to this witnessing ... (168)

Weine's approach and arguments demonstrate a deep reverence for witnesses and the role they play within society. He extended this reverence further when considering the role of what he termed *the witnessing professional*. A witnessing professional is someone who, through personal and career choices, dedicates himself/herself to witnessing (Wiene 168). For Wiene, theatre artists have the potential to become the strongest witnessing professionals as they can base their work in the witnessing imagination, which "centers on a self that sees, knows, and connects with another's experience of trauma" (168). Given this, he encouraged theatre artists to use their professional expertise in storytelling and connecting with audiences to create opportunities for others to witness human suffering, distress, and/or violence, as well as to address the socio-historical conditions which allow them to occur (Wiene 168). Wiene suggested that, when theatre artists engage in these ways, they can "expand [audience members'] capacity for witnessing" (168).

When representing human suffering, distress, and/or violence, however, a number of issues arise. One of the concerns theatre academics and arts scholars have raised revolves around the limits of language. In fact, many scholars have argued that language cannot contain suffering, distress, and/or violence (Higgins & Silver 37). This argument is based on the idea that suffering, distress, violence, and even pain function beyond the

rational system of representation used by language, so cannot be contained within it. It has even been suggested that suffering, distress, violence, and pain can never be truly communicated – only experienced (Higgins & Silver 37; Scarry 4).

Elaine Scarry moved one step further, proposing that pain and distress actually destroy language (4). This idea has been widely supported by theatre scholars and arts-based trauma theorists, who have argued that language fails those trying to use it to discuss suffering, distress, and/or violence (Scarry 4; Higgins & Silver 37). Rather than allowing people to communicate about this suffering, distress, and/or violence, the breaking or shattering of language can actually do the reverse – ultimately displaying an inability to capture and communicate such experiences through words (Higgins & Silver 37).

This creates a tension within Western theatre. On one hand, it offers audiences more than language. On the other hand, Western theatre has long relied on language as its primary means of communicating shows' narratives to audience members. An example of this tension can be seen in the play *Scorched*, which had its English language premiere at Toronto's Tarragon Theatre in 2007 ("Scorched"). *Scorched* follows two children as they piece their mother Nawal's life history together after she has passed away. To tell this story, playwright Wajdi Mouawad interwove three timelines. The first follows the twin children's search to discover Nawal's past. The second focuses on teenage Nawal falling in love, getting pregnant, and having her love and child taken away. The third and final timeline explores adult Nawal trying to find her son while navigating a war that threatens to tear her country apart. While doing so, Nawal is captured, tortured, and raped. This then becomes the crux of the show's narrative as it is revealed – both to the audience and

the twins – that the man who tortured Nawal, raped her, and fathered her twins was, in fact, the son who was taken away from her years before.

Scorched certainly deals with representations of human suffering, distress, and violence, as well as representations of pain. If language cannot communicate suffering, distress, violence, or pain, however, how can *Scorched*'s narrative be conveyed to audience members? Jill Dolan suggested that experiences that cannot be fully articulated through language may still be felt by the audience during a performance (164). She argued that this can be done by carefully building the extra-verbal elements of a piece, including silences, stutters, and breaks (Dolan 164). The hope is that rather than reducing suffering, distress, and/or violence to fit into language's limits, artists will embrace that these experiences explode out of language in order to communicate to audience members that everything involved is not on display (Dolan 164).

While Dolan did not make these arguments in relation to *Scorched* directly, they can certainly be seen to apply to the play. For instance, a powerful example of language's limits and the power of silences and breaks appears in a scene where Nawal speaks to her torturer and rapist during his trial for war crimes, saying:

You know the truth of your anger toward me, when you hanged me by the feet,
when the water and the electrical current ... the shards under my fingernails ...
the gun loaded with blanks against my temple ... The gunshots and death that are
part of torture, and the urine on my body ... (Mouawad 63)

While this monologue is horrifying, its words alone do not communicate Nawal's experience so much as they list what violence was enacted against her. Looking more deeply, however, the fact that each image of violence immediately disappears into a

break or silence indicates that something beyond the monologue's words is being conveyed. Each production's director and each performer playing Nawal then have the opportunity to build these elements that exist outside language and, through them, suggest Nawal's lived experience exists, even if it is not being directly expressed through the lines.

Although the idea of full silences makes sense as a theory, does the audience actually have access to what fills these breaks and failures? Certainly, one of the issues theatre artists face is how to balance showing the breaks and failures in communicating about human suffering, distress, and/or violence with the importance of connecting with audience members who may not feel that they know what fills those breaks and silences. This issue has left many theatre artists asking: how can these breaks be shown without turning human suffering, distress, and/or violence into spectacle? What about audience members who cannot or do not wish to engage with the breaks or silences? What happens to these individuals?

In relation to the first question, scholars have argued that when language is too heavily relied upon or silences and breaks become too realistic, representations of human suffering, distress, and/or violence may simply be turned into spectacles (Salverson 184; Tanner 21). In fact, certain scholars, such as Salverson, have extended the argument further, stating that realism is a trap when it comes to representations of human suffering, distress, and/or violence (184). While realistic narratives can show the literal events of human suffering, distress, and/or violence and may feel like bringing the truth of these events to light, these narratives are often not able to address victims' and/or bystanders' lived experiences (Tanner 21). Thus, relying too heavily on such narratives can turn

representations of human suffering, distress, and/or violence into little more than simplistic spectacles that focus on imagery over human thought and feeling (Tanner 21). Some scholars have argued that, when this occurs, audience members can become accustomed to human suffering, distress, and/or violence, reducing witnessing and empathy (Tanner 21).

Unlike the limits of language, where scholars have made clear recommendations, many questions remain in relation to when and how representations of human suffering, distress, and/or violence turn into spectacles. Some scholars have suggested that artists need to continually work to balance the literal and the abstract (Salverson 186), but little advice has been given about how to do this. Salverson offered up the idea that artists should not only represent suffering, distress, and/or violence, but also allow spaces for hope and resistance (188). Doing so could assist in creating complex representations that acknowledge the humanity of all characters involved. In addition, hope and resistance can reserve space for characters' lives beyond the suffering, distress, and/or violence they are experiencing (Dolan 5). It allows an opportunity to explore images of what the world could be or what individuals hope it will one day become (Dolan 5). Providing space for hope and resistance does not mean wrapping up representations of human suffering, distress, and/or violence with the idea that everything will be alright one day, nor does it mean that this approach will be appropriate in all situations. It may, however, complicate representations, preventing them from simply becoming spectacles, as well as giving audience members hope for the future.

Salverson promoted the need to reserve space both for others and for the work. She advised that theatre artists recognize that all audience members bring personal stakes

to a production and that these stakes are never fully revealed (Salverson 182-183). Thus, everyone's experience of a show will be different – and may not be understood by the artists involved (Salverson 182-183). This does not mean, however, that anyone's responses should be dismissed or diminished (Salverson 188).

Similarly, it is important to respect the experiences of the artists involved in a show. Speaking about community productions mounted with non-professional actors and non-actors, Salverson once again pointed out the need to reserve space, this time for the theatre artists (186). At the same time, however, Salverson highlighted that theatre cannot become therapy for any one individual (186). Thus, she posited that there needs to be a balance between supporting artists and respecting the work of the theatre, especially when a production involves a high level of personal vulnerability (Salverson 186).

Through this sub-section, I have laid out many topics scholars have considered in relation to representations of human suffering, distress, and/or violence. In spite of this, however, questions remain, including: What happens when audience members do not know what fills breaks and silences? To what level can hope and/or resistance work against representations becoming spectacles? What else can be done to keep representations complex and to communicate characters' lived experiences of human suffering, distress, and/or violence to audience members? While these questions are outside the realm of my present study, I believe they are important for the future of theatre theory and understanding representations of human suffering, distress, and/or violence fully.

Vicarious Trauma

While my work is not based in vicarious trauma research, its central position in other theatre scholars' thoughts about what actors could be experiencing when working with narratives and/or images of human suffering, distress, and/or violence makes it important to address. I avoid cause and effect based language in the rest of my dissertation. In this sub-section, however, I use the language of vicarious trauma studies in order to accurately reflect the field and the work being undertaken in it.

There have been a number of studies conducted to explore the effect encountering narratives and/or images of trauma can have on professionals in non-arts based fields, causing psychologists to conclude that those who work with or witness others' pain and suffering are at risk of being affected by it (Figley, *Compassion Fatigue: Coping* 1, 45; Cunningham 329). Joan Brady and her colleagues, having conducted a study with female psychotherapists, concluded that "[w]ith repeated exposure to graphic details of abuse, therapists may experience vicarious traumatization" (386). This trauma "occurs across age groups, cultures, level of training, and personal history of trauma" (Clark & Gioro 86).

What exactly is vicarious trauma though? It has been defined as the changes individuals experience through engagement with others' trauma and as a stress response similar to post-traumatic stress that includes a shaking of worldview and/or identity (Brady, et al. 386). Central to vicarious trauma is the exposure to trauma occurring not directly, but through witnessing (Trippany et al. 32). While the occasional scholar suggests the idea of vicarious trauma related to perpetrators or bystanders, most argue

that vicarious trauma can only arise from engaging with trauma survivors and is directly related to the traumatic narratives and/or images shared by them (Trippany et al. 32).

The majority of the research regarding vicarious trauma symptoms has focused on professionals, such as nurses, police officers, and therapists, in their work environments. There have been studies, however, that have included family members of trauma victims/survivors. Across all the research, similar symptoms have been reported, including:

intrusive imagery, nightmares, increased fears for the safety of oneself and loved ones, avoidance of violent stimuli in the media, difficulty listening to clients' accounts of events, irritability, and emotional numbing ...

emotional and physical depletion, a sense of hopelessness, and a changed world view in which others are viewed with suspicion and cynicism ...

(Bober & Regehr 2).

While the exposure to trauma comes from different sources, a number of scholars have suggested that vicarious traumatic and post-traumatic stress disorder can be equally intense. Researchers Marcia Clark and Sandra Gioro even argued that “indirect trauma can disrupt [trauma workers'] mental and emotional well-being to such an extent that troubling changes begin to insinuate themselves into their personal lives” (Clark and Gioro 86).

Other psychologists and scholars have challenged this claim about symptom intensity. This challenge has been led by Ted Bober and Cheryl Regehr, two researchers who have analyzed the findings of numerous vicarious trauma studies. According to them, individuals who encountered narratives and/or images of trauma did consistently

report vicarious trauma markers. These markers, however, did not usually reach a point where they “markedly [interfered] with [the individuals’] functioning” (Bober & Regehr 2). This puts into question the idea of approaching these responses as symptoms and vicarious trauma through the medical model.

Even researchers who have questioned Bober and Regehr’s findings have been open to the idea that there are levels to the number and intensity of symptoms experienced by their subjects. In addition, scholars have agreed that, while some people can be psychologically disturbed by encountering trauma, others may not be at all (Briere & Scott 13). Vicarious trauma scholars have also suggested that the occurrence of trauma symptoms is highly influenced by stressor characteristics; others’ reactions; and victim variables, which are defined as “those aspects of the victim that were in place before the trauma but that nevertheless are associated with a likelihood of sustained posttraumatic stress” (Briere & Scott 14). These include, but are not limited to: gender, age, race, and socioeconomic status (Briere & Scott 14).

Some vicarious trauma researchers have argued that past personal history with trauma should be considered a victim variable, suggesting that, if an individual has such a personal history, s/he could encounter flashbacks and/or re-traumatization when working with someone with similar experiences (Bell et al. 465). Brady and her colleagues, though, suggested that the situation is more complex (387). While they agreed that professionals with past personal histories of trauma may re-encounter memories of their experiences, Brady and her colleagues also contended that trauma workers without past personal histories with trauma can experience feelings of guilt or inadequacy as they may believe they lack the first-hand experiences necessary to fully understand and help their

clients (Brady, et al. 387). In addition, Paul Valent found that trauma workers may re-experience upsetting encounters from their pasts even if these encounters are not similar to anything a client is dealing with (Figley, *Compassion Fatigue: Coping* 45). Given both these findings, psychologists now believe that an individual's past traumas cannot be directly linked to levels of vicarious traumatic stress or resilience.

Self-awareness, on the other hand, is a victim variable that has been strongly correlated with lower levels of vicarious trauma and greater resilience (Brady et al. 390). Trauma workers with higher levels of self-awareness often report noticing their reactions to vicarious stress earlier than those with lower self-awareness (Brady et al. 390). In addition, those with higher levels of self-awareness generally are more proactive in seeking out support from both peers and health and wellness professionals (Brady et al. 390). Finally, individuals who demonstrate higher levels of self-awareness frequently employ a number of support systems in their day-to-day lives and report greater assistance from the systems they have established (Brady et al. 390). Thus, it is not that those with higher levels of self-awareness are inherently more resilient and less prone to experiencing vicarious trauma. It is rather that individuals with higher levels of self-awareness often have a stronger ability to identify how they feel and what support systems could be of assistance to them, and are more likely to employ these systems (Brady et al. 390).

On the other hand, research has indicated that individuals who demonstrate higher levels of empathy are more likely to experience vicarious traumatic stress (Figley, *Compassion Fatigue: Coping* 1). Scholars have suggested that individuals with higher levels of empathy may more easily imagine themselves in the position of primary trauma

victim/survivor, perpetrator, or bystander, as well as understand the emotions that go along with these positions (Figley, *Compassion Fatigue: Coping* 1). Highly empathetic trauma workers who forge strong emotional connections with primary trauma victim/survivors find themselves even more vulnerable to vicarious stress (Figley, *Compassion Fatigue: Coping* 1). Some scholars have argued that female employees are more likely to forge these strong emotional connections, demonstrate higher levels of empathy, and experience vicarious trauma (J. Brown et al. 323).

Moving beyond personal variables, stressor characteristics are also related to the likelihood of developing vicarious trauma. The primary stressor characteristics associated with increased vicarious trauma are the types of trauma being encountered and the victims' ages. Research studies have consistently found that working with adult victims of torture, domestic abuse, child abuse, and/or rape increases trauma workers' likelihood of experiencing vicarious stress (Bober and Regehr 7). In addition, trauma workers who assist child victims of violence are more likely to experience vicarious stress (Brady et al. 387). While victim variables and stressor characteristics can relate to an individual's likelihood of experiencing vicarious trauma, no one has yet been able to use them to make accurate predictions about how any one person will respond to specific narratives and/or images (Yehuda et al. 1311).

Researchers have, however, been able to pinpoint some means of support for trauma workers who experience vicarious traumatic stress. While these researchers have focused their studies on a wide range of professions, their suggestions about how to limit or guard against vicarious traumatic stress show have remained relatively consistent. These suggestions, as well as the findings they are based upon, are generally divided into

two central areas: personal and interpersonal, with workplace supports being lumped into this second category. I propose, however, that workplace supports be separated into a third category, dubbed *structural supports*.

Structural supports are workplace and/or industry-wide choices or systems that provide attention and care to professionals who work with narratives and/or images of human suffering, distress, and/or violence. Choices or systems that create professional environments which foster personal and interpersonal attention and care would also fall into the category of structural supports. While the field of vicarious trauma studies does not currently acknowledge this third category, as I employ it in relation to my research, for the sake of clarity, I also use the terms *structural supports*, *structural support systems*, and *structural forms of attention and care* within this sub-section and throughout the remainder of my dissertation. Throughout the remainder of this sub-section, I address each of type of supports, moving from personal into interpersonal and, finally, structural.

While interpersonal and structural support systems cannot be underestimated, self-care is equally important (Neumann & Gamble 345). In vicarious trauma research, two of the most cited forms of self-care are rest and relaxation. Researchers have advised that these two elements can assist trauma workers by providing opportunities to release work-related stress and recharge (Figley, *Compassion Fatigue: Coping* 145). On a physical level, researchers have encouraged trauma workers to get enough sleep, as well as engage in forms of body relaxation, such as massage, yoga, or meditation (Figley, *Compassion Fatigue: Coping* 185, 205). Additionally, researchers have recommended mental and emotional supports, including avoiding mentally demanding or emotionally challenging material and situations outside work (Neumann & Gamble 346). Instead,

researchers have pushed trauma workers dealing with vicarious stress in the workplace to engage with light, positive imagery and/or narratives outside it (Neumann & Gamble 346).

While rest and release are seen as vital for trauma workers, studies have shown that building and maintaining strong bodies and active minds has a powerful impact on these workers' resilience (Cunningham 341-342). Given this, trauma workers are encouraged to find and engage in physical activities they enjoy, especially when experiencing the effects of vicarious stress. Hobbies, activities, and even vacations are also encouraged as they allow individuals to stay mentally and emotionally active. In addition, hobbies and activities can provide opportunities for self-expression (Cunningham 341). Finally, hobbies and activities can offer support through building positive emotions and keeping trauma workers engaged with non-work-related material (Cunningham 341). Vacations take this a step further, allowing a break from an individual's normal routines and, potentially, affording a chance for a physical, emotional, and mental reset (Harr 79).

While the supports I have introduced thus far can all assist trauma workers, their impact has limits. Therefore, researchers have spoken about the importance of creating a well-rounded, fulfilling life outside work in order to maintain a sense of self beyond one's profession (Figley, *Compassion Fatigue: Coping* 166). Reserving a space for oneself outside work can provide some protection from trauma workers losing track of their own lives, becoming completely absorbed by the traumatic images and narratives they are encountering vicariously (Neumann & Gamble 346).

Creating this work/life divide can be challenging, however, especially when individuals are deeply committed to their work. Trauma workers have often reported continuing to think about work and work related issues, even during their downtime (Neumann & Gamble 346). For this reason, vicarious trauma scholars have recommended building specific rituals to mark the beginning and end of both work and personal time, creating a stronger divide between the two (Neumann & Gamble 346). Even with these rituals, trauma workers may encounter bleed over between their work and home lives. Given this, researchers have suggested that trauma workers need to constantly be re-establishing and reinforcing firm lines between their work and personal lives (Neumann & Gamble 346).

The final form of self-care I address in this sub-section is an individual's belief that s/he is aiding others and/or contributing to positive change. This belief may be linked to spiritual concepts of serving a higher power or may simply be a trauma worker seeing his/her work as making a positive, meaningful contribution to the world or a specific part of it (Figley, *Compassion Fatigue: Coping* 167). Whether coming from a spiritual or personal source, the belief that one is making a difference has been found to radically reduce professionals' likelihood of developing vicarious trauma (Bober & Regehr 2). For those who do experience vicarious traumatic stress, belief in one's work making a positive difference in the world increases the likelihood of recovery and decreases the time required to do so (Bober & Regehr 2).

While belief in one's ability to create positive change may, at first, appear to be a victim variable, it is generally approached as a form of personal support as it is a mindset that can be developed and shaped through education and reinforcement. The education

and reinforcement of the belief, however, most often fall into interpersonal and structural support systems, respectively. Given this, I will address them in later in this sub-section.

Moving beyond personal systems, there is a range of interpersonal supports available to many trauma workers. According to Clark and Gioro, these interpersonal support systems can be grouped using the acronym ACT (86). This stands for: *acknowledge, connect, and talk* (Clark & Gioro 86).

When discussing interpersonal support systems, scholars have consistently emphasized the importance of acknowledging trauma workers' experiences with vicarious trauma (Bell et al. 467; Brady et al. 390; Clark & Gioro 86). There are two components that emerge in this form of support. The first is peer acknowledgement (Clark & Gioro 86). The second is trauma workers' own acknowledgement, which is a personal support, influenced by what I consider the structural support of informing trauma workers that distress can occur in relation to their work (Clark & Gioro 86). For those already working in their chosen fields, this may require professional training or development sessions (Bell et al. 467). Without information about what vicarious stress is and how it can manifest, trauma workers who experience it may feel insane, going on to stigmatize themselves and/or co-workers with similar experiences. Further, these trauma workers may feel uncomfortable sharing what they are experiencing, assuming they will be judged, and, thus, may avoid seeking support or even professional help (Bell et al. 466). Therefore, researchers have argued that it is vital for trauma workers to have access to information about vicarious stress and to be encouraged embrace this information (Bell et al. 467).

Stigma, however, cannot be eliminated solely by trauma workers acknowledging and accepting vicarious traumatic stress. In fact, scholars have argued that it is equally – if not more – important for employers, trauma workers’ family and friends, and members of society at large to learn about and acknowledge vicarious traumatic stress (Briere & Scott 17). This position has been bolstered by research showing that others’ reactions, including their acceptance or denial of vicarious traumatic stress, have a significant impact on trauma workers’ ability to deal with such stress (Briere & Scott 17). Although they are key to trauma workers’ health and wellness, others’ acknowledgement and acceptance of vicarious trauma can be difficult to foster. For this reason, researchers have often argued the need to distribute information about vicarious trauma to employers, trauma workers’ family and friends, and society at large (Briere & Scott 17).

Acknowledgement is important; but, alone, it is not enough. Research has demonstrated that trauma workers also need to connect with and receive further interpersonal support from others (Cunningham 334). Scholars have posited that connection provides the some of the greatest assistance when it comes from individuals that professionals who work with human suffering, distress and/or violence value in their lives, such as parents or significant others (Todaro-Franceschi 89). Therefore, scholars have advised that individuals in these professionals’ lives foster open lines of communication with them (Todaro-Franceschi 89).

In addition to connecting with loved ones about vicarious stress, trauma workers find assistance from connections with their co-workers and peers. Therefore, scholars have encouraged trauma workers to build relationships with colleagues that “value and attend to [one] another’s well-being” (Clark & Gioro 86). Such connections can be

challenging to form, however, especially for those already encountering vicarious traumatic stress (Bell et al. 467-468). There are some structural supports that can assist trauma workers in building connections with co-workers and peers. I address these in the structural supports discussion, below.

Although establishing the availability of interpersonal support systems may simply feel like a step toward support, it is actually a form of support, in and of itself (Thompson et al. 71). Research with mental health counselors has indicated that just knowing interpersonal support is present can diminish the effects of vicarious traumatic stress and increase resilience (Thompson et al. 71). For this reason, scholars have argued that trauma workers should be encouraged to continue forging connections with supportive individuals whom they trust, even when they do not have the strength or energy to fully connect with these individuals (Brady et al. 390).

The final category of interpersonal support outlined by Clark and Gioro is talking. Their understanding of the term *talk*, however, is broad. It includes, but is not limited to, emailing, letter writing, speaking one-on-one, engaging with support groups, and therapy. While discussing their experiences with vicarious trauma can provide a great deal of support to trauma workers, who to engage with for these discussions is an important choice (Briere & Scott 41). In fact, scholars have found that confiding in the wrong person can actually be harmful as listeners' reactions have a significant impact on trauma workers' resilience and ability to deal with vicarious trauma (Briere & Scott 39). According to Briere and Scott, trauma workers could even be "re-traumatized" by sharing more information than they are comfortable with, sharing at all before they are ready to

do so, and/or sharing with unsupportive listeners (39). Talking with supportive listeners when trauma workers are ready, however, can be a powerful form of support.

Thus far, I have focused on personal and interpersonal supports, but structural supports can play a key role in trauma workers' health and wellness. Psychologists have consistently emphasized the responsibility that falls on employers to build and maintain working environments that reduce the effects of vicarious traumatic stress and increase employees' resilience (Bell et al. 466; Brady et al. 390). As trauma workers, in the course of their employment, must confront material that can put their health and wellness at risk, employers need to do everything they can to mitigate this risk (Bell et al. 466). Given this, scholars have recommended that employers create formal workplace education processes that address vicarious traumatic stress (Bell et al. 467). Doing so allows workers to gain the information they need to support themselves and others when experiencing vicarious trauma and can reduce stigma related to these experiences (Bell et al. 467).

There are employers who have pushed back against this, suggesting that there are already informal education processes available in most workplaces. Informal systems, however, are not enough in and of themselves. There is an added level of support when employers are involved and education systems are formalized (Bell et al. 465-467). This is due to the fact that, by the very nature of creating a formal system, employers acknowledge vicarious traumatic stress, supporting that it is a legitimate concern (Bell et al. 465-467; Clark & Gioro 86). On top of that, formal education systems allow employers to ensure that support and accurate information is available to all employees who experience vicarious trauma (Bell et al. 465-467). Finally, continued education

introduced by workplaces can assist in creating environments where co-workers are invested in each other's health and wellbeing (Clark & Gioro 86).

For professionals already ensconced in their fields, information dispersal through workplaces is often the most effective form of education (Brady et al. 390). Post-secondary schools and training institutions, however, can be a more efficient means of reaching future trauma workers, leading scholars to endorse that current and future students in relevant fields be made aware of vicarious stress and vicarious trauma in post-secondary or training institutions (Brady et al. 390). This argument is based on the premise that, prior to entering the workforce, students need to be informed about what vicarious stress and vicarious trauma are, their potential manifestations and symptoms, and options for support systems and treatment (Brady et al. 390). By addressing this material at such an early point, the hope is that employees' and employers' understanding of vicarious trauma and compassion for those who encounter it will increase and stigma will decrease (Brady et al. 390).

Once again, though, acknowledgement and education are not enough. For this reason, researchers have argued for workplace created group discussions and support groups, as well as for the availability of more individual supports, including peer counseling (Cunningham 324). Like formal workplace education systems, group discussions and support groups have been promoted for several reasons. First, they reinforce workplaces' acknowledgement of and commitment to supporting employees who are experiencing vicarious traumatic stress (Brady et al. 390-391). They also show that employers view vicarious trauma as a serious issue (Brady et al. 390-391). Beyond that, having a workplace group discussion or support group ensures employees have at

least one interpersonal support system available to them (Brady et al. 390-391).

Moreover, group discussions or support groups can assist in building an overall workplace environment of community, investment, and care (Clark & Gioro 86).

Another powerful structural support that scholars have promoted is restructuring workloads. Research has consistently shown that those who work with sexual assault victims, domestic abuse victims, torture victims, and children who have encountered violence are more likely to experience vicarious traumatic stress (Bober and Regehr 7; J. Brown et al. 322; Brady, et al. 387). Given this, vicarious trauma scholars have championed the idea of spreading cases that include these high risk factors amongst as many employees as possible so that no one person moves from high risk situation to high risk situation without a respite (Bober & Regehr 8). The goal of this is to “limit the traumatic exposure of any one worker” (Bober & Regehr 8). While it could be very difficult to build this structural change into some work environments, it has been found to be one of the most effective ways of reducing vicarious trauma and of increasing resilience (Bober & Regehr 8).

While the symptoms and the support systems introduced in this section have been endorsed by numerous vicarious trauma scholars, there are other researchers who have questioned and challenged current understandings in the field. One of the strongest challenges has come from Bober and Regehr, whose research was introduced earlier in this sub-section. After examining a cross-section of the various support systems recommended by other scholars, Bober and Regehr questioned the steps that were being promoted, arguing that there is not enough evidence to claim that any support systems make a significant difference to trauma workers’ levels of vicarious stress (7-8). There

was one notable exception, however: altered workloads that limit the number of high-risk images and narratives any one trauma worker encounters (Bober & Regehr 8). Altered workloads have clearly demonstrated themselves to be effective in both lowering levels of vicarious stress and increasing levels of resilience (Bober & Regehr 8). Given the lack of conclusive evidence regarding other support systems, however, Bober and Regehr recommended that further research be conducted into whether vicarious stress can lead to a trauma based, mental health diagnosis and whether the majority of the support systems that have been endorsed are truly effective (7-8). In the meantime, they suggested that attention be primarily focused on limiting individual trauma workers' exposures to high-risk narratives and images (Bober & Regehr 8).

Throughout this sub-section, the cause and effect language of vicarious trauma studies was used. This was necessary to accurately outline the work of vicarious trauma scholars. For the remainder of my dissertation, however, I use the subjective and intersubjective language of phenomenology, even when discussing vicarious trauma research.

Conclusion to Chapter 2

In this chapter, I have explored four major areas of literature relevant to my study: phenomenology, ethics, theatre theory, and vicarious trauma studies. First, a key term from each field was introduced and its definition and history were addressed. Following this, I conducted a literature review of the four major fields. Here, I introduced material within each field that is pertinent to my current work. Within the literature review, the language of each field was employed and I refrained from editorializing about the

theories I considered. In my later chapters, however, especially 5 and 6, I further explore my questions and responses to the theories addressed in this literature review as I discuss them in relation to my study.

CHAPTER 3. METHODOLOGY

Introduction to Chapter 3

The objective of my study was to describe professional actors' lived experiences of representing human suffering, distress, and/or violence, as well as to explore what personal, interpersonal, and structural factors can have an impact on these experiences. I chose to conduct a phenomenological, interview-based study as it helped me to thoughtfully reflect on actors' lived experiences. This chapter reviews the method for my study, discusses my data gathering and analysis processes, and addresses the ethical protocols that were in place. Although research studies are not unheard of in theatre scholarship, they remain less common than historical and theoretical approaches. Therefore, I provide an extensive discussion of my methodology and study structure.

Method

Before conducting my study, it was important to establish the method I would use. Prior to doing so, however, I needed to decide on a methodology to frame the study. I ultimately chose phenomenology as it supported my research goals and interests, including investigating professional actors' lived experiences of representing human suffering, distress, and/or violence; focusing on participants' subjective experiences; and describing rather than explaining the causes for the phenomenon being addressed. I was also drawn to phenomenology as it maintains a close link with both the material under consideration and the participants sharing their experiences, allowing for deeper reflection on human consciousness and human experience (Moustakas 43-44). With

humanity and human experience making up the core of my research, I felt a phenomenological methodology was the strongest choice for my study.

Once I chose my methodology, I moved on to my research method. Although several methods were considered, the van Manen model stood out to me and I ultimately selected it for my study. One of the reasons I was drawn to the van Manen method was the heavy emphasis it places on the complexities of participants' lived experiences. In fact, van Manen saw phenomenological research as an "attempt to ... construct a full interpretive description of some aspect of the lifeworld, and yet remain aware that lived life is always more complex than any explication of meaning can reveal" (18). This resonated with my study, as well as its values and fascinations. In addition, the van Manen method provided the structure necessary for my qualitative, interview-based study. After all, it is by participants sharing their lived experiences of representing human suffering, distress, and/or violence in their full range of complexity that we can begin to recognize the potential consequences of these representations for the professional actors who undertake them and address any ethical questions that arise.

Another factor that drew me to van Manen's method was his thoughtful guidance regarding conducting human science research. Van Manen provided descriptions of the six activities that comprise his method, which are:

- (1) turning to a phenomenon which seriously interests us and commits us to the world;
- (2) investigating experience as we live it rather than as we conceptualize it;
- (3) reflecting on the essential themes which characterize the phenomenon;
- (4) describing the phenomenon through the art of writing and rewriting;

- (5) maintaining a strong and oriented pedagogical relation to the phenomenon;
- (6) balancing the research context by considering parts and whole (30-31)

Finally, I selected the van Manen method for its flexibility. Personal reflection and sharing are central to my study. Given this, the interviews I conducted needed an open structure that enabled participants to tell their stories and speak fully about their experiences. At the same time, the interviews needed to align with my research objective in order to maintain the integrity of my study. For a method to support these needs, it required a flexible structure that could guide without being prescriptive. This was offered by van Manen, who identified his approach to phenomenological research as one that “tries to ward off any tendency toward constructing a predetermined set of fixed procedures, techniques and concepts that would rule-govern the research project” (29).

Sampling and Recruitment

After establishing my methodology and method – and receiving approval for my study from York University’s ethics board – I moved into the recruitment phase. To gather professional actors, invitations to participate in my study (see Appendix A) were sent out via e-mail. I targeted four avenues to ensure these e-mailed invitations reached actors. First, I contacted professional Canadian theatre companies, asking that they forward my invitation to participate on to actors they had worked with and/or were currently working with. Second, I sent the invitation to participate to Canadian Actors’ Equity Association and ACTRA, the two unions that oversee professional English-language actors’ work in Canada. I requested that the unions forward the invitation to their members. Third, I sent the invitation to Canadian universities and colleges with

Theatre or Drama departments, requesting that they pass the invitation on to their graduates, as well as to current students with professional acting experience. Finally, I provided invitations to professional actors I had worked with in the past or knew personally. I also asked that these individuals forward the invitations to any fellow actors who they thought might be interested and eligible for the study.

The invitation included several criteria for inclusion in my research. To qualify, individuals had to be located in Canada and be 18 years of age or older at the time of the interview. All participants were required to have worked or be working as professional actors with at least three years of professional theatre experience. For the purpose of this study, a professional actor was defined as an actor who had consistently received payment for his/her work. While union membership was not a requirement, the majority of participants belonged to ACTRA and/or CAEA, with many also maintaining membership in international unions, such as the American-based Screen Actors Guild (now SAG-AFTRA). Finally, participants needed to have experience representing human suffering, distress, and/or violence in professional acting environments, including professional theatre.

My invitation to participate asked that individuals who met the study's criteria and were interested in participating contact me directly via e-mail. When potential participants contacted me, I immediately confirmed that they had read and understood the information contained in the invitation. This included checking that potential participants understood the nature of my study, as well as the role they would have within it. I also confirmed that they met the necessary criteria for inclusion in the study. If potential participants were informed, eligible, and still interested, I e-mailed them an informed

consent form (see Appendix B) to review. Individuals who, after reading the form, consented to participate were invited to a one-on-one interview with me – the primary researcher.

Data Gathering

Participants in the study engaged in a phenomenological interview with me at a mutually agreeable time. Participants were offered a choice of locations: York University, Toronto General Hospital, or a private space of the participant's choosing. A theatre company provided a meeting room for two interviews to allow actors who were engaged in a rehearsal process but interested in the study to participate.

Prior to starting each interview, I reviewed the informed consent form with the participant. The details of the form are discussed below in the ethical protocols section. Once the participant had signed off on the informed consent form, s/he was asked to complete a short demographic questionnaire, which addressed age, gender, training, union status, and acting technique. When this questionnaire was completed, the interview began.

I opened each interview with the question, "Could you please describe your experiences of representing human suffering, distress, and/or violence?" The participant was then given an opportunity to speak to this open-ended question for as long as s/he wished to. When each participant had fully answered this question, I would then ask follow-up questions to encourage further deep, thoughtful description of relevant material. The follow-up questions were also open-ended. They focused on subjective experience and encouraged participants to speak freely. Each time I asked a follow-up

question, I listened carefully to the answer, allowing it to guide me to my next question. At the end of each interview, the participant was asked if there was anything else s/he wanted to add. All the interviews were conducted in person and audio taped with two digital recorders.

The study consisted of 20 interviews – enough to reach saturation of themes. Although 20 participants were ultimately included in the study, I conducted a total of 22 interviews. One participant's interview was removed for not meeting the study's criteria for inclusion. In our preliminary e-mail interactions, this participant had self-identified as a professional actor based on the criteria I laid out above. During the interview, however, the participant confessed that s/he had never been paid to act, had not attended any form of actor training, did not belong to any acting union, and was not active in the entertainment industry. Given these revelations, the interview was removed from my study and the participant was replaced.

Another participant was interviewed twice. During the first interview, this participant – who works as both an actor and director - mainly spoke about his/her directing experiences. Therefore, a second interview was conducted to focus exclusively on the participant's acting experiences. The two interviews were then combined and, from that point on, were treated as a single interview. With the one interview removed and the two interviews with the same participant merged, I entered the data analysis phase of my study with 20 interviews.

The breakdown of the participants whose interviews continued to the data analysis phase is:

Gender	Female	Male
Number of Participants	10	10

Years of Experience	3-5 years	5-10 years	10+ years
Number of Participants	2	5	13

Union Membership	Union	Non-Union
Number of Participants	17	3

Data Analysis

With the interviews completed, I moved into data analysis. My first step was getting the interviews transcribed verbatim by a professional transcription service. When I received the transcripts, I checked them all for accuracy, reading them over while listening to the original recordings. After any errors were identified and corrected, I read each transcript over again, in its entirety, in a single sitting. At this point, no attempt was made to identify meaning units or delve into themes. Instead, an overall sense of the material was sought. This step was extremely important as it facilitated the development of a holistic understanding of each interview.

After reading for an overall understanding of the interviews, I undertook the second step in the analysis. In this step, I read each transcript for a third time, marking all significant changes in meaning. These changes were denoted with vertical lines or slashes, which divided the transcripts down into meaning units. These meaning units are essentially the segments created after the researcher “delineates each time that a transition in meaning is perceived” (qtd. in Valle 39). For example, in this selection from one interview, there are several meaning units denoted:

Also, if you are conscious, then you can be much healthier. I mean, that’s really the bottom line. If you’re unconscious then – then you’re more likely to hurt

yourself... / So, yea, I mean, I don't think we solved any problems by talking about it, but I think it was – it was helpful, probably to both of us because, first of all, she's quite a bit younger than I am. And maybe she hasn't encountered this kind of thing exactly in this form and, certainly, I don't think she's played a part that is – that calls for that much victimization. Self-victimization, you know. / And – I don't want to talk too much about her because I don't want to compromise her privacy; / but, you know, just talking about it with somebody who is affirming your instincts and your feelings is – is helpful. (Interview 21)

Meaning units that were relevant to my study were then identified and placed into a separate document, ready for further analysis.

From there, the third step in my data analysis was elevating the language of each meaning unit from quotidian speech into “phenomenologically psychologically sensitive expressions” (Giorgi 130). To accomplish this, the relevant meaning units, now separated and placed in another document, were edited to eliminate all phrasing and information specific to each speaker. The goal of this step was to remove the colloquialisms and personal references that made each comment particular to one individual in order to reflect the deeper, more universal ideas contained within the meaning units. For instance,

So, yea, I mean, I don't think we solved any problems by talking about it, but I think it was – it was helpful, probably to both of us because, first of all, she's quite a bit younger than I am. And maybe she hasn't encountered this kind of thing exactly in this form and, certainly, I don't think she's played a part that is – that calls for that much victimization. (Interview 21)

Became,

I don't think we solved any problems by talking about it ... it was helpful ... to both of us ... I don't think she's played a part ... that calls for that much victimization. (Interview 21)

As this example demonstrates, the third step in my data analysis altered the meaning units I was working with to transcend the personal and bring the underlying ideas being discussed to the foreground. At no point were participants' words replaced or re-written.

After this process had been completed, I entered the fourth step, where each meaning unit was labeled with a word or phrase that summarized the core idea contained within it. For example, the selection above was labeled as *Role of Talking with Others*. Within each interview, meaning units that addressed the same core topic were grouped together.

The fifth and final step was to compare the groups of meaning units across all the interviews to establish what themes and ideas could be consistently identified. In some cases, this forced the labels used for groups of meaning units to expand, merge, or shift. For instance, *Role of Talking with Others* turned out to be a sub-grouping under the larger heading of *Interpersonal Support*. Finding these larger headings was another process that worked to uncover the universal elements of the lived experience of representing human suffering, distress, and/or violence.

These steps allowed me to reflect on the essential themes of the lived experience of representing human suffering, distress, and/or violence and describe this lived experience through elevated language, considering both the parts and whole of it. By the time I completed my analysis, there were three major themes that were identified as central to all participants' lived experiences of representing human suffering, distress,

and/or violence. These themes were corroborated by another phenomenological researcher, verifying that meaning units and descriptions that had been identified were clearly present in the transcripts. The three core themes that were identified will be discussed in chapter 4.

Ethics Review

My study was approved and supervised by York University's Office of Research Ethics. The study was deemed to hold minimal risk for participants as it was interview based and no deception was involved. In spite of this, there were a number of ethical protocols put in place to support and protect participants. These protocols included; providing an informed consent form and information about the study, keeping participants' identifying information confidential, and giving participants access to this dissertation, as well as any additional publications arising from my research.

All participants were provided with and signed an informed consent prior to starting the study. As was discussed above, as soon as potential participants contacted me, I immediately sent them the informed consent form. Individuals who proceeded with the study were each given two copies of the same form prior to their interviews being conducted. One copy was signed and returned to me, while the second was retained by the participant. All participants were able to give their own consent as they were over the age of 18 and were fully competent.

The consent form followed the guidelines provided by York University's Office of Research Ethics. Within the form, a full description of the study was provided, including how the interviews would be conducted. Thus, prior to the interview starting,

participants knew they would be asked to discuss their experiences of representing human suffering, distress, and/or violence. They were advised that they would be given as much time as they wished to fully and completely answer each question. In addition, participants were informed that, at the end of their interviews, they would be able to discuss any material they felt had been missed or wanted to address further. Participants were instructed that they could withdraw from the study at any time. There were, however, no participants who chose to exercise this option. If participants had questions or needed more information about the study, they were asked to contact me, as the primary researcher, or York University's Office of Research Ethics. Relevant contact information was provided in the informed consent form.

As there was no deception involved in my study, participants were clearly and fully briefed about potential risks and rewards related to speaking about their lived experiences of representing human suffering, distress, and/or violence. When speaking about these lived experiences, there was a risk of participants encountering challenging, or even painful, emotions (Munhall 166). These risks were outlined in the informed consent form, then verbally reviewed with participants. In case participants did experience upset in relation to the study, information regarding support systems and means of contacting them were provided both in the invitation to participate and in the informed consent form.

While there was a risk inherent in participating in the study, there was also the possibility that participants could experience personal rewards in relation to engaging with the study. Qualitative researchers have identified that many people find it beneficial

to speak about their experiences (Weiss 123). This information was included in the informed consent form and was reviewed verbally.

Participants were aware that they would not be anonymous, as the nature of the study involved speaking with me, the primary researcher. Their personal data, however, has been kept confidential. Participants' names and all other identifying information have been removed from all materials except the original recordings and transcripts. The only people who had access to the interviews prior to this material being removed were me, as the primary researcher; my supervisor, Gail Mitchell; and a professional transcriptionist. If requested, committee members had access to the transcripts with all identifying information removed. In this dissertation and all future publications, participants' names and identifying information will remain confidential. All recordings and transcripts with identifying information are being kept in secure storage.

All participants were offered access to this dissertation and any further publications that emerge from my study. Returning information to the participants is of great importance to me as it acknowledges the amount of time and trust they have put into the research. In addition, providing information to participants allows it to flow into the entertainment industry, potentially supporting its professionals' health and wellness.

Conclusion to Chapter 3

This chapter addressed the structure of my study and the ethical protocols I put into place to protect participants. I began the chapter with a discussion of how I chose my methodology and method. Following that, the study's recruitment procedures were reviewed. I continued on to discuss my data gathering and analysis processes. Finally, the

ethical protocols used over the course of the study were reviewed. With the study's structure now laid out, I will continue on, laying out my core themes in the next chapter.

CHAPTER 4. THEMES

Introduction to Chapter 4

Once data gathering and analysis was complete, three core themes were identified. These themes reveal that the lived experience of representing human suffering, distress, and/or violence is a paradoxical process based in interwoven realities, marked by intense emotions and lingering elements that necessitate personal, interpersonal, and structural attention and care. In this chapter, I breakdown my three core themes, laying out the descriptions underlying each one. In order to do this, I begin by discussing the interwoven realities that are the basis of the actor's work, as well as the paradoxes that emerge from these realities. I then outline the intense emotions found in the workplace and the lingering elements that persist outside it when actors represent human suffering, distress, and/or violence. While previous scholarship has often framed actors' lived experiences of representing human suffering, distress, and/or violence in a negative manner, even using terms like *trauma* in relation to them, my research demonstrates the depth and complexity of these experiences. In order to capture this depth and complexity, I consider the rewarding and challenging aspects of representing human suffering, distress, and/or violence, as well as everything in between or outside those two positions. In the final section of this chapter, I address the various forms of attention and care that currently provide support to actors whose work includes representing human suffering, distress, and/or violence.

Paradoxical Processes Emerging from Interwoven Realities

Introduction to the Paradoxical Processes Emerging from Interwoven Realities

The first theme that was identified is that representing human suffering, distress, and/or violence is a paradoxical process based in interwoven realities. When reviewing the transcripts of participants' interviews, the paradoxical nature of actors' work was immediately apparent. It was only upon closer examination, however, that theatre's inherent interweaving of the quotidian and the fictional revealed itself at the core of these paradoxes. Digging into this, it became clear that all the paradoxes actors had described in relation to their work emerged from this one central tension. Thus, in this section, I address both the interwoven realities and the related paradoxes.

In order to accomplish this, I first discuss how the quotidian and the fictional are woven together in the theatre. Following this, I introduce the multiple paradoxes that spring from the tension between the quotidian and the fictional, as well as the consequences these paradoxes can have for actors as they represent human suffering, distress, and/or violence. The paradoxes I consider include: needing to both connect with and remain apart from characters while playing them, having to be strong in order to perform while trying to stay open and vulnerable in character, and needing to maintain trust with fellow actors even while trust is lost amongst characters.

Interwoven Realities

Theatre, by its nature, exists simultaneously in two realms. The first is the quotidian, where actors are in a performance space, surrounded by audience members. The second realm is the fictional, where characters are moving through the world of the

show. Although, at first glance, it would seem easy to keep these two realms separate, acting interweaves them in such a complex manner that they often cannot be fully pried apart. Thus, for professional actors, engaging with and navigating interwoven realities is not an option – it's an integral component of their work.

Within Western culture, common knowledge would suggest that the quotidian is “real”, while the fictional is “fake”. When participants spoke about acting, they often appeared to maintain a similar differentiation, describing their work with words like “play” and “pretend”. As participants went into greater depth about their experiences, however, they collapsed this divide, revealing the central paradox of their work – that the real is an integral component of the fictional, while the fictional is inherent in the real. By the end of each interview, it was apparent that actors' work thoughtfully interweaves the quotidian and the fictional.

While acting and theatre have often been declared bastions for the fictional, the real runs throughout the fictional. Most obviously, there are situations where actors represent historical events and/or portray historical figures in their work, as well as shows that have been constructed from interviews or writers' personal experiences. Within my study, a surprising number of participants had performed in at least one show that incorporated historical material and/or contemporary interviews. Even when this was not the case, however, participants reported that characters cannot simply be dismissed as fictional. One actor explained that:

you're tackling a real character. You don't know a specific name or face, but you know it when people [say], “You remind me [of] my brother” ... you've tackled a

real character there ... I have played a character - not necessarily [knowing] them, but I have played a real character. (Interview 8)

This speaks to the idea that the real can emerge through more than just documented events and historical figures. It can also arise from our shared humanity and human experience.

Theatre and acting are fundamentally tied to our shared humanity and human experience. Theatre generally uses situations created by human beings (the writers) and performed by other human beings (the actors) to explore lived experiences and our shared humanity (through narrative and character) with still more human beings (the audience). Although this is an extreme way of phrasing my point, it does convey that human experience and connection is at the core of the theatre. The only way that core can be realized is through actors engaging with human experience and connection – and, thus, the real – in their work. This idea ran throughout the interviews, with participants making statements like, “performance is something that needs to be real, needs to be honest. It shouldn’t be faked” (Interview 7). Another participant explained why the real is integral to acting, stating that:

[what] I’ve always hated about being an actor is the statement that you’re a liar ... actors are only good if they’re truthful. We have to be truthful to the moments that are occurring on stage or screen; because if we’re lying about them, the audience will see through the lies ... [It’s an] instinctual thing ... if you believe everything you’re doing on stage and you’re telling the truth of the moment, your audience will buy into the truth because that’s what we do as humans and they will

experience the story - the story will be told and you can affect an audience...

That's when the audience member goes, "I get it". (Interview 16)

As these quotes demonstrate, even when a show's narrative is fictional, the real surfaces through characters' emotional truths, journeys, and relationships, as well as theatre's shared humanity.

If theatre and acting involve the real, the quotidian equally involves the fictional. Individuals constantly shape their lives through their own subjective lenses. They take the information they encounter and create narratives for themselves and others (Kerby 40). In fact, there is nothing we encounter that is not shaped by our subjective experience, as well as our need to create narrative in order to understand ourselves, our life journeys, and others (Kerby 40). This topic, however, was not discussed in detail by participants. Therefore, while it is important to introduce here, I will not expand on it further until chapter 5, where I discuss it in relation to phenomenological theory.

Having laid out the idea of theatre as a space of the intertwining real/fictional, I can now address the ways actors navigate that space. Participants were clear that, while rehearsing and performing, they were aware of their characters' journeys and emotions, as well as of their concerns as actors, including lines, blocking, and the safety of themselves and their co-workers. There was not, however, a definitive line between character and actor or "real" thoughts and "fictional" feelings. This led several participants to identify that they had "to some degree ... lived [each of their characters' journeys] now" (Interview 16) and/or that they had lived their characters' perspectives (Interview 10). For example, one participant, speaking about a show with a Holocaust

narrative, referenced that s/he had gone to the Auschwitz gas chambers each time the show was performed (Interview 6).

It is important to note that none of the participants, at any point in the interviews, suggested that portraying an experience onstage is an exact mirror of encountering that experience in the quotidian world. In fact, many participants were extremely vocal about the differences, the most important of which was reversibility. By its nature, acting is based in reversibility (Féral & Bermingham 104). This is what lifts acting – and theatre – out of pure quotidian and into the realm of representation. Reversibility, however, is not erasure. While actions performed in the theatre can be reversed, characters/actors' emotional journeys cannot. For example, the participant who spoke about going to the gas chambers explored this idea directly, describing that while, after a show, s/he could realize that his/her trip to the gas chamber did not actually occur, the thoughts and emotions that arose in order to represent that moment remained, carrying with them quotidian consequences (Interview 6).

The fact that characters/actors' thoughts and emotions are truthful and not reversible, however, does not mean actors are losing themselves in or living as their characters. In fact, representation is much more complex than that. Participants in my study reported their work being “truthful” and “real”, but not exactly the quotidian. They identified themselves as both being and not being their characters. They described that they had lived through their characters' journeys, but that they could never truly understand what it was like to live these journeys in the quotidian. Ultimately, this left participants approaching the real and the fictional more as a “yes/and” than an “either/or”.

Acting's complexity suggests that the line between the real and the fictional is not as firm as society presents it to be. Instead, participants' reports indicate that in our subjective experience – which phenomenology would suggest is all we ever have access to (Bullington 20) – the real and the fictional can be interwoven in such a way that an encounter comes to simultaneously contain both and neither. It is this phenomenon that caused participants to identify their work as complex, difficult to explain, and even mystical.

Me/Not Me

A series of paradoxes explode from the complexity of acting's intertwined realities. One such paradox that all participants reported encountering was based in their relationships with their characters and the tensions they maintained between self and character. Reflecting on the relationship between self and character, participants identified there both being and not being a separation.

Participants did not feel that this dynamic is understood, even in the entertainment industry. Rather, Western culture buys into the notion that there is – or, at least, should be – a clear line between actor and character. Some people had even argued to participants that the nature of Canadian theatre undermines an actor's connection between self and character. In mainstream, professional Canadian theatre, productions are generally scripted and fully staged, meaning actors usually do not invent their own characters. Instead, characters are created by writers and realized by directors and actors. Given this, characters may interact in ways that the actors playing them would not in their quotidian

lives. While participants agreed, however, that there are often differences between self and character, that is simply one side of the me/not me paradox.

The other side is the connection between self and character. For participants, this connection was crystal clear. As one participant stated, “there is always an element of myself [in my characters] ... it’s accessing that part of [myself] that could be that person” (Interview 11). Some participants expanded this idea further, suggesting that every individual has the ability to do or say anything given the right set of circumstances. These participants would then identify the given circumstances needed for them to behave as their characters did. Finding links to their selves allowed participants to represent even the most extreme characters. Thus, part of the actor’s task is to explore what circumstances and understandings of the world could lead him/her to a character’s thoughts, feelings, and actions.

Although many actors may play a single character over the years, participants identified that their versions of characters live and die with them, as each actor’s interpretation of a character is uniquely shaped by his/her physical body, voice, thought, emotion, imagination, and lived experience. Thus, while the bones of a character remain across various versions of it, each actor infuses him/herself into the work in such a way that their interpretation of the character becomes a unique being. The actor’s process, then, involves blending self and character in such a way that the final creation is a hybrid entity that is simultaneously both and neither.

Even once this entity is created, the relationship between self and character remains in constant negotiation and flux. This continuous movement creates a tension between self and character. Each actor must then navigate this tension in order to not lose

the self nor disengage from the character. This led one participant to declare that the relationship between self and character is like an elastic band, always being stretched or loosened in order to find and re-find the appropriate tension (Interview 4). The participant explained that, “[you want] to find the right tension so that you’re not portraying your own self on stage or your own opinions on stage, but you’re finding ... the points of the nature of the character and your own nature” (Interview 4).

This navigating of the tension between self and character could be seen in the language participants used when speaking about their characters. Participants vacillated between referring to character as self and distancing self from character. While reflecting on a single experience, one participant demonstrated this vacillation, stating that:

I’m always dumbfounded by these actors that are like ... “I didn’t like her at all.”

I’m like ... “What do you mean? You didn’t like me?” “Oh I like you, but I didn’t like the character” “But that is me!” ... you’re not judging your character ... you become very protective of these people ... they’re family ... There are many layers to them ... they become a member of your family. (Interview 2)

Within a few minutes, this participant identified character as self, as entirely separate from self, and as family – close to, yet not quite, self. In addition, the participant moved back and forth between personal and impersonal pronouns, again demonstrating the complexity of actors’ relationships with their characters. This shifting language was consistent across all the interviews.

Language also emerged as a factor when participants reflected on how they built the relationship between character and self. A number of participants described it being challenging to find the words to explain the process they go through to represent their

characters. Others spoke about this process being one of empathy, but not quotidian empathy. Considering the form of empathy actors engage with when embodying characters, one participant offered up the term *creative empathy* (Interview 3). This participant suggested that creative empathy is unique as actors feel for and through their characters. This ties into the me/not me paradox, however, as actors empathize with their characters (engagement with an other) and empathize through their characters (engagement with the self).

While there was consensus regarding the importance of empathy in acting, participants were divided about the strongest place from which to start building the relationship between self and character. Two camps of actors emerged: those who start from self and those who start from character. Participants who started from self often asked themselves a series of questions, such as: “If the part of me that overlaps with my character’s primary personality trait was my dominant personality trait, what would I be like? How would I then respond to my character’s given circumstances?” Participants who used this approach liked that it could create an immediate connection between self and character and bring emotional truth, even early in a rehearsal process (Interview 6).

Participants who approached their work through character began with research, script analysis, and/or physicality. This allowed them to develop their interpretations of their characters first. Imagination also plays a key role in this approach as each actor questions what kind of person would think, feel, and act as his/her character does in the script. While building a sense of the character, each actor would find the connection with self. Participants who used this approach felt it allowed them to build strong understandings of their characters, while also providing the distance necessary to protect

against their characters and their selves collapsing into one another. Despite some starting from self and others starting from character, though, all participants reported ultimately employing both self and character based approaches over the course to their work.

Similarly, the two starting places were often presented more as leanings or preferences than hard and fast rules. Most participants described working from a place of adaptability and shifting approaches to best suit the demands of each character and show. That adaptability continued into overall technique. While academics have often debated the pros and cons of working from a specific technique, none of the participants in my study were devoted to a singular acting method or approach. In fact, they did not even focus on this topic, instead attending to the end point of their work, which was achieving a compelling performance. In order to get to this end point, participants would draw on a variety of acting techniques and approaches that they felt best suited them, their characters, and the needs of their shows.

Strength and Vulnerability

Acting's complexities make the work physically, mentally, and emotionally demanding, especially when narratives of human suffering, distress, and/or violence are involved. Participants felt the demanding nature of their work was tied to the level of openness it required. Many participants suggested that actors must be open while performing in order to allow audience members to connect with characters' experiences and a sense of shared humanity. That openness, however, is a form of vulnerability. While it can be challenging to make and keep oneself vulnerable at the best of times, participants noted that it takes extreme strength to do this while engaging with narratives

and/images of human suffering, distress, and/or violence. Thus, a paradox is created: the more vulnerability an actor needs to engage with, the greater his/her reserves of strength must be. While many participants described encountering this paradox, few expanded on it. Therefore, this sub-section, although extremely important, will remain brief.

To understand this paradox, it is important to more fully explore the role of vulnerability in acting. Participants identified that actors continually put themselves on the line by engaging with emotionally, physically, and/or mentally challenging material with a level of vulnerability that also connects audience members to the material. Often, in order to achieve this, actors push themselves past their quotidian comfort zones. Given this, it should not be surprising that participants considered vulnerability as an integral part of acting. As one participant explained, “[actors are] so vulnerable. Actors are vulnerable all the time” (Interview 2).

Interestingly, however, participants described their work involving two linked forms of vulnerability, which mirror the intertwined realities of acting. On one hand, actors encounter the mental, physical, and emotional forms of vulnerability that emerge from the work itself. On the other hand, they experience the vulnerability of performing. From auditioning to going off-book to stepping in front of an audience, actors are constantly required to step into positions where they need to deliver while being judged by those around them. Then, even when actors do deliver, they may still be judged for anything from their weight to their voices to their level of talent or skill. As a number of participants explained, actors use themselves as tools within their work, leaving them vulnerable to others’ responses and judgments, as well as unexpected situations.

Many participants reported that the only way to attain and maintain this degree of extreme, multi-layered vulnerability is through equally intense strength. That strength was often seen as being tied to self-awareness. In fact, participants highlighted the importance of actors knowing themselves and being grounded by that knowledge. That and self-trust were presented as essential to foster and maintain the level of strength needed for actors to be vulnerable in their work.

Trust/Danger

At its core, the strength/vulnerability paradox is based in the subjective – a single actor must find the strength needed to be vulnerable in his/her work. There is, however, a companion paradox connected to the intersubjective aspect of acting. This paradox is trust/danger. In order to represent moments of onstage danger, participants identified that actors need to have trust in the safety of the scenes, their own abilities to safely engage with the demands of the scenes, and their fellow actors. The safety of the scene will be discussed later in this chapter, within the Intense Emotions section. Self-trust was addressed above, in the Strength/Vulnerability sub-section. What remains to be considered, then, is the interpersonal trust required between actors as they represent moments of emotional and/or physical conflict.

As with strength and vulnerability, participants reported that interpersonal danger can only be conveyed when the actors representing it trust one another. The more extreme the level of danger, the greater the degree of trust required. Again, actors are forced to navigate the interwoven realities of their work, maintaining a bond of trust with their fellow performers while honestly representing characters experiencing the opposite.

One participant noted the unique working relationship this situation creates, stating that: “You have to have enormous trust ... You have to fuck each other over in a scene... And then you have to fuck each other up ... then you go out for a drink. It doesn’t mean we’re crazy. It just means that’s our job description.” (Interview 2) This sentiment was echoed by other participants, who also commented that greater levels of trust, connection, and communication allowed them to more openly and honestly “fuck each other up” in scenes, as they had faith in their own and their co-workers’ safety ultimately being maintained.

Having faith in the safety of the environment, however, did not mean the work lacked personal stakes or consequences. One participant explained that, since scenes of heightened aggression or conflict are generally uncomfortable and surprising for characters, they often also become uncomfortable for the actors who undertake them (Interview 12). This participant argued that the discomfort is vital as it is a sign that actors are engaging with the emotional space of the conflict and representing it in a way that does not diminish its significance for audience members. Another participant, however, emphasized the importance of actors’ discomfort not crossing the line into pain or insecurity about safety (Interview 15).

Trust is central to that line not being crossed. How, though, is it possible for actors to build and maintain this level of trust? Participants repeatedly emphasized the power of communication and its ability to assist in building and maintaining trust. In rehearsals, communication often takes the form of discussion. When moments of conflict, especially those that include a physical confrontation, are blocked or rehearsed, they are

generally represented with decreased speed and emotion, allowing actors and directors to communicate about the moments and how to safely execute them.

During performance, however, there is no opportunity to discuss the scene or portray it with lowered speed and intensity. Therefore, by this point, trust in the scene, oneself, and one's fellow actors needs to be solid. That trust can then be bolstered by techniques actors have developed to maintain as much communication as possible while onstage. Eye contact was the most common technique participants reported relying upon while performing moments of physical conflict. For example, one participant stated that, during a fight scene, s/he would look in the other actor's eyes to confirm that everything was under control (Interview 20). Another participant explained why eye contact is used as a form of communication onstage, saying that, "[i]t's remarkable the information you get from each other's eyes ... it's just this immediate information" (Interview 15). Using non-verbal communication, such as eye contact, actors can maintain intimacy, connection, and trust, even while performing moments of extreme conflict.

Even with these communication techniques, however, trust amongst actors is extremely delicate and easily lost when co-workers are unable or unwilling to take the steps necessary to nurture it. Most participants had encountered at least one situation where trust was lost with a fellow actor while working on a show that included moments of conflict. The most commonly cited reason for this occurring was the fellow actor becoming so absorbed in his/her character's emotionality that his/her awareness of safety evaporated. In stage combat circles, this has been dubbed *red-eye*, a condition where an actor becomes so caught up in a show's fiction that s/he begins to be swallowed up by it (Interview 12).

This situation, however, is not restricted to stage combat situations. For example, while representing a married couple in a fight, a participant realized his/her fellow actor was losing emotional control. When asked to tone down the level of anger and aggression in the scene, this other actor was unable to do so. This broke the trust with the participant, who expressed that s/he could not trust that the other actor would not genuinely attack him/her. Another participant summarized that, “violence is usually high emotion ... you have to sit in control of emotions, totally, in those moments. Otherwise ... you’re going to destroy the trust relationship between you and the other actors. They’re not going to trust you.” (Interview 20) In situations where their co-workers lost control and trust was broken, participants emphasized that it was difficult, if not impossible, to rebuild. Participants also consistently stated that they were not able to fully perform moments of conflict without that trust. Instead of being able to focus on their work, the participants felt forced to attend to their own safety, leading them to pull back in scenes and removing their ability to truly engage with or portray the danger their characters were meant to be experiencing.

How and why does the initial issue - a lack of control while representing violence - occur? Is there a way of addressing the issue? Below, in the Intense Emotions sub-section, I consider this experience and discuss one participant’s encounter with losing control.

Conclusion to the Paradoxical Processes Emerging from Interwoven Realities

Discussing the lived experience of representing human suffering, distress, and/or violence, participants noted that actors’ work weaves together the quotidian and the

fictional, generating a series of paradoxes. In this section, those paradoxes and the interwoven realities that sparked them were addressed. The interwoven realities were introduced first; and, through them, Western culture's clear distinction between the real and the fictional was questioned. From there, a series of paradoxes were explored, including: me/not me, strength/vulnerability, and trust/danger. Although the next section looks at the intense emotions and lingerings that can arise over the course of a production, I return to the material that has been addressed here in chapter 5, where I discuss it in relation to relevant literature.

Intense Emotions and Lingerings

Introduction to Intense Emotions and Lingerings

Returning to my raw data, the second major theme was that actors' lived experiences of representing human suffering, distress, and/or violence includes intense emotions in rehearsals and performances, as well as consequences that I have dubbed *lingerings* beyond them. Throughout this section, I introduce these intense emotions and lingerings. After describing the emotions participants reported in rehearsals and performances, I address physical, emotional, character based, and social short-term lingerings. Finally, I explore long-term lingerings, using the same breakdown of physical, emotional, character based, and social.

I have divided the lingerings reported into two categories - short-term and long-term - to honour the distinction participants in my study identified between lingerings they experienced while engaged in contracts and those that remained beyond these contracts. I have labeled the former *short-term lingerings* as they generally dissipate

within a few weeks of contracts concluding, as actors release their characters and transition fully back into their quotidian lives. Long-term lingerings, by contrast, remain after actors release their characters, continuing for extended periods, even up to the present day. While the line between short-term lingerings and long-term lingerings can be blurred, as life cannot be easily categorized, I have used participants' own identifications about which lingerings were short-term and which were long-term.

While all participants encountered intense emotions and lingerings, it is important to note that there was a wide range of responses, with some participants describing extreme emotions and powerful lingerings, while others reported few emotions and low intensity lingerings. Many participants also found the consequences they encountered in relation to their work shifting from contract to contract, demonstrating that the lived experience of representing human suffering, distress, and/or violence emerges out of a complex interplay of a number of factors. In order to understand this lived experience, it is vital that the entire range of consequences and intensities participants encountered be considered and respected.

Intense Emotions

Participants described a number of intense emotions and challenges that arose for them over the course of representing human suffering, distress, and/or violence. These experiences occurred in both rehearsals and during performance runs. Although there can be some overlap between the experiences participants encountered in rehearsal periods versus performance runs, I will, whenever possible, discuss material in relation to one or the other.

Intense Emotions in Rehearsals

During rehearsals, a number of challenges arose for actors who were representing human suffering, distress, and/or violence. While the emotional commitment required is generally not as high as performances, rehearsals can be an extremely physically, emotionally, mentally, and energetically draining time. Immediately upon starting a contract, actors undertake their preliminary work, which can include: reading the script multiple times; engaging in script analysis and character building techniques; and even undertaking additional research. Rehearsals can also include multiple repetitions of moments of human suffering, distress, and/or violence as they are blocked and worked. Participants noted that there were times when they worked with a specific scene or moment for hours on end. When this occurs, actors are often asked to experiment or dig down into challenging, painful emotions, thoughts, and/or actions. Unlike the set, well-rehearsed nature of performance, rehearsals frequently become a time of navigating the unknown; negotiating choices; and sometimes even revealing personal views, thoughts, or experiences. This combination of elements, together with the level of repetition used, led one participant to argue that rehearsals can be the most dangerous time for actors when working on productions that involve representing human suffering, distress, and/or violence (Interview 12).

For several participants, the intense emotions of rehearsal started early in the process, with the initial table read. In fact, many participants described the table read as being especially challenging as they went on the emotional ride of the script during this time. One participant in particular spoke about crying deeply and often in table reads and

early rehearsals (Interview 1). At the same time, however, emotions that occurred at this point were often different than those participants encountered later in the rehearsal process. The participant who cried deeply and often identified that this was because s/he was not yet seeing the material through his/her characters' eyes, so engaged with it more as an audience member, being swept away by the narratives and the emotions they evoked (Interview 1). Other participants also found their emotional experiences shifting throughout each rehearsal process, as they became increasingly invested in and tied to their characters' positions and perspectives. Essentially, over the course of rehearsals for a production, actors shift from receiving a story to navigating an experience.

In spite of this shift in perspective, sadness remained a part of many participants' lived experiences of representing human suffering, distress, and/or violence throughout the rehearsal process. This sadness even left some participants feeling depressed, especially when in rehearsal or engaging with show material or additional research outside it. One of the ways participants dealt with their sadness and depressed feelings – both at rehearsals and when working outside them – was crying. As a participant explained, “You cry ... It pours. [Material] pours in and then [tears] pour out” (Interview 4). At the same time, crying became exhausting, at times leading some participants to wish they could distance themselves from their emotions, even for a short time. Immediately after the quote above, the same participant stated that, “we did a lot of crying ... some days you just go (sigh), “[I] don’t want to [cry] anymore” (Interview 4).

While sadness, feeling depressed, and crying felt overwhelming and all consuming at times, they were not the only emotions participants experienced. Feeling disturbed or fearful was also commonly reported. For many participants, fear emerged

when working with material related to death, loss, or the unknown. The strongest example of this could be seen in a participant's description of playing a character who had committed suicide. S/he described a sense of darkness and fear bubbling up in rehearsals and building until closing night (Interview 8). These emotions manifested most strongly when the participant was rehearsing or performing the scene where his/her character recounted committing suicide.

Feeling disturbed or fearful translated to a sense of trepidation for some actors. One participant experienced this trepidation in relation to a monologue s/he had to perform in a show based on quotidian events. In this monologue, the character speaking told the audience that the rest of his/her family had been killed in the Holocaust. Whenever the monologue was approaching in rehearsals or performances, the participant encountered a building sense of trepidation (Interview 17). These feelings gave him/her the feeling of jumping off a cliff whenever s/he started the monologue (Interview 17). Other participants reported similar impressions of jumping or falling into moments of representing extreme suffering, distress, and/or violence.

Experiencing increased levels of frustration or even anger was also common for participants when working with narratives of human suffering, distress, and/or violence. This seemed to occur more frequently when the narratives included situations the participants felt were "unjust" or "unfair". A powerful example of this was the participant who encountered trepidation leading up to his/her monologue. During and after the monologue, this trepidation transformed into frustration, with the participant reporting that, "[the family members] were so close to all being saved ... I find [that] just excruciatingly frustrating" (Interview 17).

While participants often experienced intense, challenging emotions when representing human suffering, distress, and/or violence, there were also times when they encountered a lack of feeling or emotion, a situation many found alarming. Participants who felt detachment or apathy generally did so later in the rehearsal process. Frequently, in these cases, participants had encountered intense emotions early in the rehearsal process; but, as their work continued, they noticed their emotional responses disappearing.

According to participants, it is common for the emotions that emerge while in character, working on scenes or running a show, to become less powerful and less evocative over time. While it can be easy to find anger or sadness or joy when performing a scene for the first time, actors often find their emotional responses wearing through during rehearsal or performance processes, as the work becomes routine. Participants consistently identified this as normal, arguing that part of the actor's job is to find ways to continually make the material feel fresh and the emotional connection to it come alive.

For some participants, however, the detachment and apathy went beyond wearing through in character emotional arcs. In these cases, participants found their emotional responses diminishing both in and out of character. For example, events that horrified them when they started the show, elicited no emotion later in the process. Participants who encountered this often questioned whether they were still "good" people. Many worried that they were becoming colder and less compassionate in their quotidian lives as well, with a few even making jokes about how their work representing human suffering, distress, and/or violence had made them dead inside.

Dark comedy, including jokes about being dead inside, was not uncommon. In fact, participants emphasized the need to find laughter in relation to their work, even if it came through unusual channels. In some cases, jokes – dark or otherwise - were shared as a way of coping with or processing the intense, challenging emotions participants encountered when representing human suffering, distress, and/or violence. In the words of one participant, “There are moments where you make the unacceptable acceptable by gallows humour.” (Interview 15)

At other times, however, jokes were not necessary as participants found themselves having what they described as perverse emotional responses to the material they were working with. For instance, there were cases where participants giggled at death or laughed at abuse. Although these responses contributed to some participants’ concerns about their empathy levels decreasing, many more suggested that the laughter was a release for empathic reactions and emotions that would have otherwise become overwhelming. Thus, while it could be easy for them to judge themselves for finding humour in darkness, participants identified laughter as an important release when working on shows that included narratives and/or images of human suffering, distress, and/or violence.

Thus far, in this sub-section, I have focused on actors’ internal processes and the relationship between actor, character, and script. Actors, however, do not work in a vacuum. In fact, others played a significant role in participants’ lived experiences during rehearsal processes. Perhaps unsurprisingly, directors had the greatest impact. While most directorial choices in terms of rehearsal structure and tone will be considered below,

in relation to the Attention and Care section, there was one directorial style that, in and of itself, initiated and fed intense emotions in the rehearsal process.

The style in question was described by one participant as an “extreme” aesthetic (Interview 14). During one rehearsal for a show, this participant’s director, who worked in this aesthetic, told his/her actors to “walk on stage as if ... ‘if you blink at the wrong time, I’ll shoot you’” (Interview 14). The director wanted his/her actors to feel that there were “imminent, high stakes... if you make the wrong move” (Interview 14). According to this director, these high stakes needed to feel like they were based in life or death (Interview 14). The actors then had to walk forward and sit on chairs for three hours, holding this level of tension in the room. Working in this way had a strong influence on the participant. Reflecting on his/her experience, s/he described that:

[I grew] very reticent about rehearsal and didn’t want to go to rehearsal because [the director] would really, really push for these extreme states of emotion ... I was terrified of rehearsal ... [It was a] dangerous feeling. I was terrified, all the time. (Interview 14)

Ultimately, by the end of his/her contract, the participant in question found this style of working exciting, trying, exhausting, frustrating, and emotionally draining, and stated that all these feelings were created and/or amplified by the director’s demanding approach.

Although directors have great power over the rehearsal room and its tone, participants also identified that co-workers can contribute to intense emotions during the rehearsal process. Frequently, while working together on a production, actors build a level of closeness and intimacy with one another. One participant explained that:

there can always be a bond formed when you're doing something creatively together ... Even though you have outside relationships ... No matter how close those relationships are, there's something about that relationship within that [creative] group, coming out of that shared relationship that we have an understanding of something that nobody else does. (Interview 1)

Representing human suffering, distress, and/or violence together can further intensify these relationships. In the words of one participant,

[There's a] bond that's created to tell those stories ... when you see [your fellow actors after closing], you can touch base a lot faster and you get back ... [to] a much more intimate friendship much more easily than ... [when] you were all just doing something silly and it was fun and you all had fun ... when you're doing shows [involving representations of human suffering, distress, and/or violence], you ... have a stronger bond to your fellow actors. (Interview 4)

Other participants compared casts who had represented human suffering, distress, and/or violence together to families or even platoons of soldiers, stating that there is a special bond created by sharing such a unique, powerful experience.

Although, in ideal circumstances, representing human suffering, distress, and/or violence can create a special bond amongst cast members, in less than ideal circumstances, it can create or amplify divisions amongst co-workers. A participant who had recently encountered the latter situation suggested that representing human suffering, distress, and/or violence is generally a taxing, emotional experience; so, if an issue with a co-worker does arise, actors may already be exhausted and/or emotionally raw, making it more challenging to negotiate and navigate the interpersonal issue at hand (Interview 1).

Participants also felt that interpersonal issues can arise more easily or more intensely when actors play characters who are engaged in problematic relationships with one another. When this situation occurs, emotional loops can be created where characters' relationships and emotions toward one another spill over into actors' interpersonal dynamics, creating issues, and then these issues and the emotions around them feed back into scenes, increasing characters' problematic responses to one another. One participant encountered this loop, finding a difficult relationship, in and out of character, continually ramping up (Interview 1). The participant eventually reached a point where s/he was consistently stepping out of rehearsals to go sob in the bathroom (Interview 1). While, in this sub-section, I am limited to discussing the emotions this participant encountered in his/her show's rehearsal process, I will return to his/her experience below, in the Lingerings sub-section.

Intense Emotions in Performance

While several of the intense emotions discussed in the last sub-section are encountered in both rehearsal and performance, there is also a range of intense emotions and experiences that remain unique to performance. In this sub-section, I focus on these experiences. Where there is an overlap with the intense emotions I introduced in the last sub-section, to avoid redundancy, I will simply note the overlap.

In order to explore the intense emotions that can arise during a performance run, it is important to first identify the unique demands and challenges actors face throughout this period. Unlike rehearsals, once performances start, actors generally move sequentially through the show's narrative, portraying each moment and scene only once

or twice per day. In addition, the length of actors' workdays often radically decreases when their shows open. On the other hand, however, performances require actors to have exceptional focus, engage with powerful emotions, and commit fully to each moment in order to communicate to and connect with audience members.

These requirements led some participants to argue that the emotions, rewards, and challenges of rehearsal are all amplified in performance. For many participants, the emotions of performance mirrored those of rehearsal, but with greater intensity. Speaking about the complexity and intensity of emotions during a show's run, a participant stated that, "as soon as I [got into character and had] ... that emotional connection with [my] character, I was fucking terrified, I was angry, I was everything at once" (Interview 7). Working with intricate combinations of intense emotions left some participants with a sense of reticence or dread about performing. Unlike other shows where there was an excitement leading up to stepping onstage, when representing human suffering, distress, and/or violence, many participants felt they needed to prepare themselves for the powerful, often uncomfortable, actions and emotions they were about to navigate.

Once a performance started, however, participants often felt swept away by the demands they faced as actors and by their characters' journeys. With this occurring and with the need to stay focused and in character throughout a show, participants had less opportunity to process emotions as they arose in performances. In fact, many participants cited not even knowing how they were feeling about an onstage moment or emotion until they had an extended break in a show, finished the performance, or even got home and sat down.

By the time participants did have an opportunity to process their experiences, they could find their emotions overwhelming. For example, after representing a situation of great suffering and violence, a participant had an extended break in a show. During this time, s/he felt continued physical and emotional consequences, often crying and trembling before returning to the stage (Interview 21). Such a long break was usual though; and, even with it, the participant could not give himself/herself over to the consequences, as s/he still had to perform in the remainder of the show. Therefore, this participant and others described having to swallow any consequences and emotions they encountered in order to continue with and focus their work. The participant who spoke about representing going to the gas chambers reported that, during this show, s/he had to navigate performing extreme circumstances and emotions. By the time the curtain came down after a show, s/he would walk into the wings and immediately collapse into tears (Interview 6).

Encountering such emotions, however, did not mean participants experienced them the same way or with the same intensity at every show. The two participants discussed in the last paragraph both spoke about the ways they expressed and/or released their emotions and the immediate consequences of their work shifted with every performance. One day they might cry (Interview 6; Interview 21). Another day they might be perfectly silent or joke with co-workers to lighten the mood (Interview 6; Interview 21). While there was no single way of responding to the work, there was one similarity across all participants' reports: no matter how intense their emotions and the costs of the work became, they were always on time and ready for their next entrances.

Once the curtain had fallen, several participants experienced a sense of release. When asked to reflect further about this feeling, a few interviewees compared it to the ancient Greek concept of catharsis. They felt that, having completely engaged with intense emotions, they were able to exorcise them, leading to a feeling of release after performances. One participant, however, believed that the feelings of release went deeper than that. According to this participant, actors have the dangerous and thrilling chance to engage with the full spectrum of human emotions, from the greatest heights of joy to the deepest depths of despair, rather than being restricted to the limited range of socially acceptable feelings (Interview 12). This argument would suggest that actors representing human suffering, distress, and/or violence and, therefore, engaging with some of the most extreme of emotions and human experiences can lead to them encountering release or even euphoria (Interview 12).

Not all participants agreed with this theory, however, nor did all experience such release or euphoria. In fact, some participants encountered the opposite, feeling a sense of despair or emptiness after their performances. One interviewee who experienced such feelings, explained that:

some shows ... you feel ebullient afterwards ... uplifted a lot of these experiences, I don't feel that way afterwards [when representing human suffering, distress, and/or violence] ... I might feel a certain gratification if the [audience] responds well ... [but I] just don't get that surge of joy ... [or] get the joy of acting ... it doesn't work that way. (Interview 17)

The emotions discussed thus far in relation to performances were often deep and potent; but, while experiencing them, participants maintained their awareness of the

intertwined nature of the quotidian and the fictional in acting. There were situations, however, where participants momentarily lost themselves, becoming absorbed into the play's fictional realm during performances. When speaking about getting absorbed early in their career or fellow actors getting absorbed, participants generally attributed the situation to a lack of experience and/or training. When referencing more recent, personal encounters with being absorbed, however, participants linked the experiences to the complexities of maintaining the interwoven realities required for representation.

Losing control and becoming momentarily absorbed by a show's fictional realm was a more frequent occurrence for early career, less experienced performers. One participant encountered an extreme example of this situation while working on his/her first professional production (Interview 8). After his/her show completed its run, it was taped. In the show, the participant had a scene where his/her character threatened another character, while a third character tried to intervene. During the taping of this scene, when the third character intervened, the participant – momentarily losing control and being absorbed by the fictional realm - turned around and hit his/her fellow actor in the face (Interview 8). At the time, the participant was so deeply entrenched in the show's fiction that s/he did not even register what had happened. Only after the taping of the scene was complete did the participant realize what had occurred. At that point, s/he was struck by guilt, embarrassment, and concern for the other actor.

The participant tried to identify why he/she had gotten lost in the fiction, suggesting it was linked to a desire to do great work while not having the level of experience and training to know how to achieve that greatness (Interview 8). Concerned that his/her acting would not be strong enough, the participant took on more and more of

the narrative and the character until his/her self was temporarily lost. While this was an extreme example, many participants reported seeing other actors lose themselves in their work and/or having temporarily lost control themselves. Participants who had lost control often attributed this to inexperience; youthful lack of control, precision, and self-trust; and failure to understand emotional and creative control. As participants moved through their careers, however, many felt they had gained self-awareness and emotional precision, which gave them a higher degree of control over their work.

While losing control was frequently deemed the terrain of less experienced performers, seasoned performers also, at times, became temporarily absorbed into the fictional. Participants also reported encountering instants of pure humanity or deep personal truths that were powerful enough to temporarily collapse the intertwined realities of the theatre, leaving actors vulnerable to falling into their shows' narratives. One participant had encountered such a situation while performing a scene where his/her character was strangled to death onstage. On opening night, as s/he represented being choked, the participant was hit on both a human level and a visceral level. When this happened, s/he felt a sudden surge of panic, becoming momentarily absorbed into the show's narrative (Interview 18).

Participants were generally surprised when they encountered such instants of pure humanity or deep personal truths. Looking back, however, they could identify several elements that they felt had contributed to these moments. For some participants, there was a strong overlap between the pieces they were working on and situations or conditions in their lives, making it difficult to maintain the tension between acting's intertwined realities. Other participants linked into their characters' humanity so deeply

that the quotidian temporarily disappeared. Finally, there were participants who found moments of physical connection, falling into narratives through specific actions or movements. Often, however, participants who became temporarily absorbed experienced a connection with their work on more than one of these levels. For example, the participant who became absorbed in his/her show's narrative while representing being choked felt a physical connection and a moment of human connection to all individuals who had been the victims of extreme physical violence, both of which contributed to him/her losing track of the quotidian while performing (Interview 18).

It is important to note that, although both case studies I have offered in relation to participants becoming absorbed into the fictional realm contained high levels of physical and emotional conflict, this was not always the case. There were certainly times where participants became absorbed during less extreme moments for their characters. The case studies I chose were simply the strongest, clearest examples of participants' experiences of falling into show's narratives.

Lingerings

In the last sub-section, I discussed intense emotions that actors experience during rehearsals and/or performances when representing human suffering, distress, and/or violence. Even after actors' workdays come to an end, however, there are personal and interpersonal lingerings that can remain. A participant described the idea that representing human suffering, distress, and/or violence can leave traces with actors outside their work time and space, stating that:

for the time period that you're doing a show, your life changes. So during the day, even though I'm not thinking about the play ... [it's like a] taste in my mouth ...

It stays with me throughout the day, until I'm completely done with it. (Interview 9)

What is it, however, that remains? Throughout this sub-section, I seek to answer this question. In order to do so, I look at the lingerings participants encountered while representing human suffering, distress, and/or violence.

Once again, I would like to highlight that, within my study, participants reported a range of experiences, from encountering numerous, intense lingerings to experiencing only a few and/or subtle lingerings, and everything in between. In addition, lingerings could shift across productions. For example, one participant described powerful lingerings related to one show, but almost none related to another. The range of participants' lingerings speaks to the complex nature of human experience and of the lived experience of representing human suffering, distress, and/or violence.

Short-Term Lingerings

In their interviews, participants identified a variety of short-term lingerings they had experienced while representing human suffering, distress, and/or violence. These short-term lingerings divided into four major categories: physical, emotional, personal, and social. While I have grouped the lingerings into these four categories, there is some overlap as individuals are whole beings with complex experiences. Where there is a significant degree of overlap, I make note of it.

Short-Term Physical Lingerings

Participants experienced numerous, diverse short-term physical lingerings. There were certain short-term physical lingerings, however, that only one or two participants encountered. In this sub-section, I focus in on the more broadly reported short-term physical lingerings. In addition, while I discuss most movement and tension related lingerings here, those specifically linked to character elements are put aside and addressed below, in my Short-Term Character Lingerings' sub-section.

The relationship between acting and energy has long been established in the entertainment industry, as has the idea of the post-performance high. Participants in my study, however, explained that the material actors work with influences their energy levels. While lighter material left many participants with energy after work, representing human suffering, distress, and/or violence did the opposite. Participants consistently felt exhausted following both rehearsals and performances. Even the post-performance high disappeared for many participants, replaced by a sense of being completely drained. There were also participants who experienced distorted forms of post-performance energy, which included bodily responses to the adrenaline of being onstage yet feeling physically, mentally, and emotionally sapped. In many cases, participants who encountered this were left completely exhausted but unable to get to sleep.

Exhaustion ran throughout participants' descriptions of their lived experiences of representing human suffering, distress, and/or violence. Several participants spoke about how, unlike the tiredness they might feel after a day of working with other material, the exhaustion they encountered when representing human suffering, distress, and/or violence extended beyond the purely physical, into every level. One participant described

the feeling after a rehearsal or performance as “that sense of being a bit of a zombie ... You’ve been worn out, inside and out so ... you literally sit passive and allow things to occur around you” (Interview 15). Many other participants echoed this sentiment, speaking about reaching points where they were too exhausted to engage with anything, to make decisions, or to even eat.

Several explanations were given for the high levels of fatigue associated with representing human suffering, distress, and/or violence. First, participants emphasized the energy required to maintain the focus necessary to act, as well as the additional focus needed when representing human suffering, distress, and/or violence. In addition, returning to the idea that actors cannot be fake in their work, participants spoke about how truthfully engaging with and moving through narratives involving human suffering, distress, and/or violence can be taxing on both personal and energetic levels.

On top of their work being taxing, actors can face challenges getting to and/or staying asleep while working on shows that involved representing human suffering, distress, and/or violence. As was mentioned above, some participants had issues winding down after performances. Even without physical adrenaline, however, there were participants who felt unable to turn off their thoughts and relax. Other participants found themselves afraid to go to sleep as they encountered nightmares. In some cases, these were actor nightmares (ie. forgetting lines while onstage); while, in other cases, they were nightmares related to shows’ narratives and/or images of human suffering, distress, and/or violence. No matter the issue behind them, sleep disturbances added an additional layer of exhaustion for these participants.

Representing human suffering, distress, and/or violence, however, can alter more than just actors' energy levels. It can also shift their movements and/or areas of tension in their bodies. When characters and/or shows' theatrical styles require shifts in quotidian movement patterns, actors can end up holding tension in areas of their bodies where they normally would not. In order to make these new, personally unusual ways of moving appear truthful onstage, actors often work hard to internalize and normalize them. This process, however, can allow the movements and/or tensions to become a part of the actors' quotidian physical vocabularies, making them difficult to release after rehearsals or performances. In fact, several participants reported internalizing movements and/or tensions to the point where they remained after the shows they were developed for had closed.

In some cases, these movements and tensions were seen as sources of pain, ranging from sore muscles to headaches to back spasms. For example, one participant, who was portraying a character with a great deal of jaw tension, often caught himself/herself holding this tension outside work (Interview 11). Over the course of the production, this participant encountered increasing levels of jaw pain and headaches (Interview 11). This was not an uncommon experience. Many participants also identified that, compared to other shows, productions that involved representing human suffering, distress, and/or violence increased the number and intensity of movements and tensions that continued outside work times and spaces. One participant even argued that, while lighter material can be physically demanding or painful, there is a unique tension and pain that emerges from the mix of physical demands, emotional demands, and heavy energy related to representing human suffering, distress, and/or violence (Interview 21).

At the same time, this participant stated that representing human suffering, distress, and/or violence can decrease pain tolerance and resilience, making physical lingerings more difficult to handle (Interview 21).

This participant had an intimate relationship with shifting movements and tensions, having encountered one of the most extreme examples of pain connected to short-term physical lingerings reported over the course of my research. The night after closing a show where s/he played a rage filled young person, this participant experienced a severe back spasm (Interview 21). By the following morning, s/he was unable to even straighten up into a standing position (Interview 21). This back spasm continued until an F. M. Alexander Technique expert stepped in, a situation that I discuss in detail in the Interpersonal Attention and Care section of this chapter. Although the participant's back spasm was resolved with interpersonal care, lingering tensions continued to cause issues over the years. At the time of his/her interview, this participant had just sought treatment for a neck spasm, which s/he believed was directly related to movements, tensions, and emotionally based lingerings that emerged from his/her latest production (Interview 21).

In addition to encountering tensions and pain, a few participants reported feeling a general sense of discomfort in their own skins while working on shows that involved representing human suffering, distress, and/or violence. While this lingering was identified, it seemed to be difficult to describe. A participant reflected on it, stating that, "I just started feeling really, just uncomfortable... [I was] feeling ... restless ... that feeling that ... you're forgetting something or something is missing" (Interview 21). Other participants spoke about feeling "off" or out of place in their own bodies. Although participants found it challenging to pinpoint the exact nature of this lingering, the fact

that those who encountered it described it as disruptive and disturbing indicates the importance of noting it and continuing to explore it in future studies.

Short-Term Emotional Lingerings

Despite there being a range in the number and degree of short-term emotional lingerings they experienced, all participants reported some level of emotional engagement and resonance with their portrayals of human suffering, distress, and/or violence. As one participant explained, “[actors don’t leave everything at the workplace] because we’re human ... things are going to affect us” (Interview 6). In light of this comment, I address the human connection actors have with their work in this sub-section.

Although there were many aspects of their work that could linger with them, participants often wished they could hold on to one element longer: the feelings of power and intensity created when representing human suffering, distress, and/or violence. While not all participants experienced these feelings, those who did reported that it could be difficult to switch over from this power and intensity, back to quotidian life and emotionality. A participant explained that, “when I finish a show, I feel like I’m just mortal again ... And I feel super-human when I perform ... [so] there’s always a disappointment that it’s over again and I’m just [me]” (Interview 14).

Many participants also felt incomplete after finishing a performance. Again, this experience was not shared by all participants; but, those who encountered it spoke about the challenges they faced immediately following performances. One participant even commented that, “your show comes down at eleven, you’re not in bed til one or two ... some actors engage in ... self-medication or numbing because it’s hard” (Interview 2).

Participants who found themselves alone at the end of a performance night often had difficulties letting go of their work and the material they were representing, preventing them from resting. This late night period could also amplify feelings of emptiness and guilt for not being home in the evening to spend time with children or significant others. These emotions and thoughts led a few participants to emphasize how emotionally challenging and even potentially dangerous this post-show period could be for actors.

While the post-show period was a powerful time for some participants, the most widespread area of short-term emotional lingerings occurred through the connection between shows' material and the world at large. All participants spoke to this, suggesting that it is difficult to work with material that involves human suffering, distress, and/or violence without considering those who encounter similar situations in their quotidian lives. In fact, one participant described that:

the thing that affected me the most ... was not so much [what] happened to [the characters] ... [but] the potential for all ... mankind ... it's not just about people over there, it's not about something far, it's about what the ... potential for that kind of thing is in us ... (Interview 19)

Often participants were surprised by the content they encountered in their work, discovering information about forms of suffering, distress, and/or violence they had not previously known much about, as well as seeing forms of suffering, distress, and/or violence from new perspectives or depth. This can raise powerful emotions for actors, particularly when their own backgrounds are stable and relatively free of suffering, distress, and/or violence. When participants in more privileged positions saw the divide between their lives and their characters' circumstances, they were frequently alarmed.

Seeing this divide was especially difficult for younger and/or more sheltered participants. Participants who encountered it, however, often felt sad, angry, frustrated, and/or powerless.

In certain cases, participants also felt guilt about their positions in life and confusion about why safety and stability are so unevenly distributed in the world. The clearest example of this guilt occurred to a participant who was working on a show that looked at prostitution, poverty, and drug addiction, as well as the vulnerabilities that emerge from them (Interview 6). Having read material about these topics and started rehearsals for the show, the participant was shocked by the lives of the characters in the production and the lives of their quotidian equivalents. This shattered the participant's sense of safety and justice in the world, leading to a self-described "breakdown" (Interview 6). During this breakdown, the participant struggled with why s/he had so much love and opportunity in life when some others do not (Interview 6). Feeling undeserving of this privilege and wanting life to be fairer, the participant went so far as to break personal objects (Interview 6).

Although it could be difficult for participants to face levels or forms of suffering, distress, and/or violence previously unknown to them, it could also be challenging for them to confront material they had a strong personal and/or familial connection to or that they developed a powerful connection to over the course of a contract. In these cases, some participants felt the weight not just of their work, but also of their own experiences and/or their families' histories. This was especially difficult when, in the midst of shows, participants found themselves in similar, or even identical, circumstances to those of their characters.

In these instances, it was difficult for participants to find the line between lingering emotions and emotions connected to their personal situations, as the two often became fundamentally woven together. When there were such direct and immediate personal resonances with representations of human suffering, distress, and/or violence, participants generally found it extremely difficult to deal with the powerful emotions that arose. One participant described this difficulty, stating:

my uncle was dying of cancer at the same time [as I was performing a character who experienced a death in the family] ... I wouldn't recommend that ... experience for an actor because ... I didn't have any time to even process his death ... I had to really fight through [the emotions] ... on different nights ... there was residual emotion ... I might even start crying or something on the way home ... (Interview 20)

Although all the participants who had had this level of overlap between their work and home lives identified their production processes as incredibly challenging and emotional, many also spoke about how their work forced them to confront the emotions connected to their personal situations. For example, the participant quoted above went on to reflect that the show “turned out to be a very positive experience because it allowed me to process some of that grief through a piece of theatre ... it was cathartic too” (Interview 20). This release was hard won, though, and required participants to have self-awareness, as well as the ability to process the emotions they were experiencing. When they did not have the tools or support systems to process their emotions, working on material that overlapped with personal suffering, distress, and/or violence could become a trigger for

participants. In some cases, they became overwhelmed and/or engaged in self-destructive behaviour.

While there were differences between participants' experiences when they were surprised by material as opposed to when they had a connection to it, there were also many core points of overlap. In both cases, representing human suffering, distress, and/or violence required participants to confront, consider, and emotionally engage with some of the most challenging aspects of our shared humanity. In the face of this, participants experienced a variety of emotions, including sadness, frustration, anger, disappointment, and hope.

All participants reported these lingerings related to the connection between representations of human suffering, distress, and/or violence and similar quotidian situations. This, however, was the only short-term emotional lingering some participants encountered. Interestingly, there was a high level of consistency amongst these participants. They were male, middle aged or older, highly experienced actors, and extremely established in their careers. They also tended to have high levels of power in the workplace, being able to speak up if they felt something was unsafe or were unable to work certain material at any given time, which allowed them to limit the costs of their work. In addition, they often had a family and a strong support system at home, as well as the financial freedom and industry clout to pick and choose contracts or even take a break from acting if they wanted or needed to do so.

Thus far, in this sub-section, I have focused on actors' personal responses to shows' content. There were also times, however, when participants found that, despite their workdays ending, the intense emotions they encountered in rehearsals and

performances remained with them. One participant described this as emotion “spring[ing] upon you without you even thinking about it” (Interview 7). This situation occurred most commonly when the emotions participants were working with included anger or sadness. Speaking about representing a character who encountered great pain and sadness, a participant explained that, “there was a period of ... feeling really sad all the time and ... experiencing that emotion all the time ... sitting on my couch and just feeling sad and exhausted and a little bit like I’ve been hit by a truck” (Interview 1).

This is not to say that sadness and anger were the only emotions that lingered. In fact, a wide range of emotions from a variety of productions lingered with participants. When working on lighter shows, these lingering emotions often included joy, happiness, and excitement. When representing human suffering, distress, and/or violence, however, the most commonly reported lingering emotions were sadness and anger, followed by fear, shame, and guilt. Participants frequently encountered multiple lingering emotions at once, demonstrating the complex nature of such lingerings.

In certain cases, shows – and the emotional landscapes that went with them – connected with participants on a deeper level than average. Sometimes participants were able to identify what they saw as the reasons for this connection, while, at other times, they could find no clear reasons. In either case, there were shows that “[crept] deeper and deeper” inside the actors who undertook them (Interview 11). While this level of connection did not arise for all participants, those who experienced it reported feeling as though their thoughts, emotions, and/or lives were taken over by their work. They identified constantly thinking about and being in the emotional spaces of the shows. One

participant felt as though his/her life was being held hostage whenever s/he encountered a deep connection with a show (Interview 18).

When these situations occurred, some participants had behavioural and/or physical manifestations of their emotions, including: crying, shortness with others, screaming or yelling, drinking, and, in one case, even throwing personal items. In some cases, even participants' coping strategies shifted. A strong example of this came from a participant who reported generally having an even temperament and excellent problem solving skills (Interview 21). While working on one show that required representing human suffering, distress, and/or violence, however, this participant's temperament shifted and his/her ability to problem solve decreased (Interview 21). S/he explained that representing human suffering, distress, and/or violence "can destabilize your mood ... destabilize your resiliency ... you get bad news and you immediately go to the place of doom ... to a freak out place" (Interview 21). This experience occurred to other participants as well, with them speaking about finding themselves in cycles where powerful emotional lingerings and lowered coping strategies fed into each other. I further address this situation in the Attention and Care section of this chapter, as well as in chapter 5.

Short-Term Character Lingerings

In the Physical Lingerings sub-section, above, I discussed movements and/or tensions that remain with actors outside their workplaces. Sometimes, however, the lingerings my participants encountered were more than just movements and/or tensions. In these cases, participants adopted elements of their characters, such as physicality,

voice, beliefs, thought process, and/or emotionality. One example of this was a participant who was playing a sexy character and noticed seductive ways of moving and standing seeping into his/her quotidian physicality (Interview 11). Even the amount of eye contact the participant made with others increased (Interview 11).

In some cases, such as the example above, participants encountered specific, identifiable aspects of their characters' physicalities and/or voices outside rehearsals and performances. There were other cases, however, where the changes were more subtle and/or dispersed. When this occurred, participants often could not specify changes they had noticed, but felt they had a different energy than usual. They spoke about this energy altering or re-framing the ways in which they spoke and/or moved, as well as shifting how others responded to them.

Not all short-term character lingerings, however, were limited to movement and/or voice. In fact, it was actually more common for participants, during their downtime, to encounter what they identified as their characters' thoughts, feelings, and/or ways of understanding the world. In these situations, participants would act or react – through thought, feeling, or viewpoint - in a manner that was personally unusual but was consistent with the characters they were portraying. The clearest example of this occurred when a participant described the challenges that arose while s/he was portraying a particularly aggressive character. The participant remembered being consistently angry and irritable while working on the show, explaining that:

I leave the theatre and I'm still thinking like a murdering gangster. I still have angry thoughts inside my head, [that] somehow transfer themselves into my life

... the energy ... stayed inside me ... I just was impatient, where I shouldn't have been and snippy, where I shouldn't have been. (Interview 18)

The participant went on to say that, "It's like voices inside your head ... it is like being crazy, totally like being crazy. It can be anyway." (Interview 18) In this case, the participant's character lingerings became so noticeable and disruptive that s/he was pulled aside in rehearsal to discuss how negative his/her attitude had become (Interview 18).

While not all situations reached this level of intensity, many participants reported seeing changes in their attitudes, thoughts, and feelings while working on productions. They talked about seeing the world in a positive way, having more energy, and generally feeling happy when working on a comedy or playing a light-hearted character. On the other hand, many participants reported seeing the world through a negative lens; having less energy; and feeling sad, frustrated, or mad while representing human suffering, distress, and/or violence, especially when portraying melancholic, impatient, or angry characters. While it is not uncommon for their characters' approaches to the world to haunt actors to some extent, I only counted situations where these approaches were markedly noticeable and influencing participants' lives as lingerings.

Another way characters' actions can linger with actors is through impulses. Reflecting on absorbing elements of a character's actions, one participant commented that,

there's so much smoking and drinking onstage [in my show] ... afterwards your first impulse is to grab a drink or have a cigarette ... I only really smoke if I'm

playing [a] character who [smokes], and then it's like, "Ok, no wait, that's not me, that's them". (Interview 11)

In another situation, a participant sent a letter about current political events to a local newspaper and his/her director immediately identified this as being more in line with the character the participant was portraying than the actor himself/herself (Interview 3).

Several participants tried to make sense of how and why short-term character lingerings emerge. The most consistent theory was that actors' engagement with their work is such that they cannot simply turn their characters off at the end of the workday. Some participants also suggested that trying to get inside challenging characters' minds can amplify how much they stay with actors outside work. As one participant explained, "in [a] quest to figure out who [characters] are, you ... get stained ... it leaves an impression on you" (Interview 18).

In order to represent human suffering, distress, and/or violence and do so believably, participants reported digging into how their characters saw the world and why they made the choices they did. This digging helped participants understand their characters' lives, personalities, and choices, as well as how they justified their decisions. This process of digging, however, further opened up participants' potential of having a stain left on them. Thus, what allows actors to create complex, well-rounded characters and portray those characters' thoughts and feelings honestly can open the door to the patterns of those thoughts and feeling lingering outside the workplace (Interview 11).

Some participants also felt that the energy of acting is tied to character lingerings. When using the term *energy*, participants were referring to the connection actors make to merge self and character. In essence, this is a return to the idea of actors working from

their selves, as well as needing to be truthful in their work. In order to achieve this truth, participants generally created characters' thoughts, feelings, and responses, then navigated through them.

Working with their characters' energies during rehearsals and performances, actors may not be able to simply release them at the end of each day. When they do not dissipate, these energies and the emotions, thoughts, viewpoints, and physicalities they are been used to create can remain with actors. As one participant described, "the energy and the focus that we use to create [theatre's] illusion ... we carry with us" (Interview 11). I return to this idea of energy and focus in my Long-Term Character Lingerings subsection, later in this chapter.

Short-Term Interpersonal Lingerings

Although I have already explored a range of short-term lingerings in this chapter, my focus has remained on actors' personal encounters with these lingerings. In this subsection, however, I shift my attention to short-term interpersonal lingerings. Rather than dividing these lingerings by groups of experiences, I do so by interpersonal relationships, beginning with co-workers.

Participants in my study found both joys and challenges in their relationships with co-workers. In addition to the average workplace interpersonal negotiations, tensions, and rewards most people experience, actors can also encounter lingering character relationships and feelings when dealing with their cast mates. Several participants experienced such lingerings over the course of various productions. Participants playing friends became friends. Those playing parents began to look after - and even feed - the

individuals playing their children. Participants playing a set of contentious siblings bickered. Finally, participants playing a class of competitive teen characters developed similar backstage politics. Participants believed this mirroring occurs because, after spending so much time approaching each other in certain ways, it is easy for actors to continue their character relationship patterns outside their work.

The reverse situation, though much rarer, also occurred. One example of this arose when a participant portrayed a perpetrator of violence, racism, and hatred in a show (Interview 2). Uncomfortable with his/her character's actions, this participant was heavily invested in communicating the differences between his/her self in quotidian life and his/her character to co-workers. The participant went above and beyond to demonstrate these differences and ensure his/her fellow actors recognized them, even bringing food to rehearsals and inviting co-workers over for dinner (Interview 2). Although this was the strongest example of reverse mirroring of character relationships that arose in my study, there were a few more subtle instances that were reported. The common thread in all the instances was that the participants involved in them deliberately worked to create the reverse of their onstage relationships because they felt personally and/or morally offended or upset by their characters' views and actions. When participants did not have this feeling about their characters' choices, however, their relationships with fellow actors were more likely to mirror those of their characters.

Looking beyond co-workers, interpersonal lingerings also emerged in participants' relationships with their family, friends, and/or significant others. One of the most widely encountered lingerings in this area was a lowered interest in being social. Many participants were tired, distant, or absorbed by their shows' content, making it

difficult for some to truly engage with those around them. In fact, there were participants who said that it felt as though there was no space in their lives for socializing while they were working on shows that involved representing human suffering, distress, and/or violence. Several participants said they chose to spend more time alone, knowing or hoping that they would be able to re-engage with those closest to them after closing the shows.

Other participants continued to go out as much as ever, yet noticed a distance between themselves and their loved ones, leading to feelings of loneliness and isolation. One participant described feeling caught in his/her show's material and character's emotionality, creating a barrier that prevented him/her from connecting with others, even when in a relaxed social setting (Interview 21). Some participants found this situation extremely challenging as they wanted to engage but felt unable to do so, while others simply identified this as part of the price of representing human suffering, distress, and/or violence.

Another area that can be socially challenging for actors is related to the larger topics they encounter through their work. A number of participants spoke about how, when working on a production, they became hyper-aware of the forms of human suffering, distress, and/or violence they were representing. This included suddenly having their focus filled with their shows' content and noticing related material everywhere in the quotidian. Certain participants embraced this focus, saying it gave them interesting material to discuss with friends and loved ones. Other participants, however, worried about becoming so absorbed that their loved ones found them boring and/or noticed themselves withdrawing from individuals who could not or did not want to discuss

shows' material. Even when participants did try to take time away from their shows' topics, they often just found themselves back in the midst of thinking about and discussing them.

While many participants experienced social challenges while representing human suffering, distress, and/or violence, there were also situations in which the opposite would occur. For example, participants reported that, when they were playing happy, joyful roles in lighter shows, they often felt a surge in their desire for social contact. In these cases, participants often reported being more excited about and engaged in going out with others.

There were also participants who sought out increased companionship when working with representations of human suffering, distress, and/or violence, often hoping others could provide safety and comfort. Participants who felt this way usually sought out people they trusted and found to be grounding forces, wanted to have conversations with these people almost immediately after finishing work, and avoided speaking directly about shows' material. In these cases, participants also frequently identified feeling down or having a fear of what they would do when they were alone and, thus, wanted to have people to engage with who could help ease the transition from the fictional to quotidian life.

Even those who did not seek out others could have lingerings related to switching from shows' worlds back to the quotidian after work. Many participants reported having difficulty engaging with their loved ones as soon as they arrived home. In some cases, participants would find their responses more in line with their characters' actions until they had some time and space to transition back to the quotidian realm. Thus, it was

common for participants who did not actively seek out the interpersonal support discussed above to want private time after work to switch from the mental space of their shows' worlds to that of the quotidian realm before engaging with their families or significant others.

Reflecting on this, one participant explained that, when s/he arrived home from work, "don't talk to me. I need ... half an hour just to get used to the idea that ... I'm here, I'm me and this is my house" (Interview 11). Another participant stated that the production process can create welled up emotions and thoughts when narratives of human suffering, distress, and/or violence are being explored, resulting in the actors involved needing decompression time (Interview 16). The two sentiments I just introduced were echoed by many performers in my study – though, notably, not by those with babies or young children. In these cases, participants often reported wanting switchover time, but not being able to obtain it, as they had to prioritize their childrens' needs over their own.

Lingerings coming into play with loved ones, however, were not restricted to the period immediately following rehearsals or performances. In fact, most participants mentioned that the lingerings they brought home with them when working on productions that involved representing human suffering, distress, and/or violence could fundamentally alter the way they engaged with their loved ones, especially significant others, for the course of the productions or, even, beyond them. When participants encountered emotional lingerings, they often felt this forced their loved ones to be nurturing and accommodating. When character lingerings arose, even in subtle ways, participants felt their shifting thoughts, attitudes, approaches, viewpoints, emotions, or physicalities were pushed onto their loved ones, who, once again, had to be accommodating. In addition,

character lingerings left participants' loved ones having to accept the idea that actors may not always be a stable force, making interacting with them or using them as a support system more complicated than the average relationship. Participants' reports in this area could reflect their loved ones' experiences or participants own concerns about not being there to support their loved ones and/or needing loved ones to make accommodations. While they spoke about their fears that the costs of their work could wash over to their loved ones, participants also acknowledged that their work fostered their spontaneity, emotionality, and openness, which were all elements they brought to their loved ones.

Thus far, I have attended to actors' relationships with their co-workers and loved ones. The consequences of short-term interpersonal lingerings, however, were not limited to individuals who were actively involved in participants' lives. Therefore, it is also important to consider how short-term interpersonal lingerings can come into play around actors' acquaintances and strangers. Participants reported that character lingerings could easily arise around acquaintances and strangers. When they found something exciting and/or desirable about their characters, participants often enjoyed acquaintances' and strangers' responses to character lingerings. For example, a participant who was playing a sexy, flirtatious character was thrilled when strangers flirted with him/her and found him/her attractive (Interview 11).

On the other hand, many participants had concerns about how they were perceived when experiencing lingerings in public. When this situation occurred, a number of participants felt society-at-large judged them, seeing them as "weird" or "crazy". These feelings of being judged seemed to be linked to a sense of being misunderstood. Certainly, participants identified that the general public in North America

does not grasp actors' work, including the costs of representing human suffering, distress, and/or violence. This led many participants to experience an increased level of insecurity around acquaintances and strangers while working on shows that involved representing human suffering, distress, and/or violence. Participants described becoming increasingly guarded around anyone who was not already in their inner circles, making it difficult to approach or interact with others.

While engaging with the public left some participants feeling self-conscious, there was another interpersonal dynamic that many participants found calming or soothing. This was their relationship with a higher power or a form of spirituality. Those who had religious and/or spiritual beliefs could find great comfort within them, if they could maintain this connection. That was a challenge in and of itself, however, as most participants with such beliefs found it difficult to connect to a higher power or spirituality while working with representations of human suffering, distress, and/or violence. The first time these difficulties arose, participants were generally surprised, not having previously faced such challenges with their faith. When participants could not regain their connection, they were often left feeling lost and alone. If they were able to link in to their higher power or spirituality, though, they frequently found increased resilience and a sense of peace.

Long-Term Lingerings

Long-term lingerings encountered by participants demonstrated a great deal of variety. In order to explore this variety fully, I group long-term lingerings into three categories: emotional, character, and interpersonal. As long-term lingerings are complex,

however, they do not always fit neatly into these categories. In such situations, I place the lingerings in question into the categories that best fit them.

Long-Term Emotional Lingerings

No matter the shows' content, the period after closing is often a difficult time for actors. Participants consistently described post-closing as a "sad time" (Interview 8). One participant explained that there is a "natural crash that comes after... that adrenaline high every night [is gone] ... it is chemical ... physical" (Interview 11). Although these crashes occurred in relation to a variety of shows, participants shared that they were "exacerbated by playing something ... that requires ... a dark focus" (Interview 11).

In addition to post-closing crashes, representing human suffering, distress, and/or violence left many participants with powerful emotional lingerings for an extended period after their shows concluded. Participants often reported being distant or short with those around them, while also being more emotional than usual. In addition to this, participants frequently felt disconnected, apathetic, and/or depressed. One participant spoke about having the sense s/he was just functioning rather than truly engaging with life (Interview 2), while another stated that:

when the show closed ... I just couldn't do anything and I was really in this funk... I just couldn't get motivated ... [everything] seemed pointless ... I kept saying ... "I don't know. I just feel pointless ... I can't focus on anything, I can't do anything" ... [it took] a bit of work to shake it off ... and I've been [acting] for a long time. (Interview 11)

This type of long-term lingering often surprised participants, demonstrating that actors cannot accurately predict which shows will cost them deeply. There also were not clear personal factors tied to this long-term lingering. In fact, participants with all levels of training and experience, as well as a range of personal histories with human suffering, distress, and/or violence could face this long-term lingering. On top of that, participants frequently did not realize the level of connection they had with their work until their shows had closed and they were deep within this long-term emotional lingering. While the lingering could be challenging, participants usually worked through it or found that it eventually dissipated on its own.

In addition to show and/or character specific emotional lingerings, there were other situations, however, where participants experienced broader emotional lingerings related to repeatedly representing human suffering, distress, and/or violence. One participant who encountered this lingering was consistently cast in roles that included high levels of suffering and distress; and, therefore, felt that s/he was continually confronted by the most challenging, devastating aspects of humanity (Interview 17). Eventually, this participant was working with pain so frequently that the emotional lingerings from multiple shows merged together into an overall sense of despair (Interview 17). At this point, s/he no longer found joy in acting and decided to leave the industry rather than continue to be cast in roles that required representing human suffering, distress, and/or violence (Interview 17).

While most participants did not reach this point, many encountered increased sadness, heaviness, pessimism, and/or anger after working on back-to-back contracts that involved representing human suffering, distress, and/or violence. A few participants

suggested that if one engages with certain emotions repeatedly, these emotions become increasingly accessible and can even grow in strength. In fact, an interviewee argued that,

when you, yourself are generating certain emotions repeatedly and regularly ...
your unconscious mind does not recognize that you ... in your life, are not going
through those things ... you are going through those things as someone else. And
the tensions can become imbedded in your tissues. (Interview 21)

Other participants agreed with this idea, with one even suggesting that “the more you work that emotional muscle, the more you’re able to ... access those feelings again” (Interview 7). I return to this concept in chapter 5 to discuss it in connection with research in other fields and shape a stronger understanding of the relationship between actors and the emotions they engage through their work.

In addition to the empathic emotions actors experience, participants all spoke about having long-term emotional lingerings related to the larger topics addressed in their representations of human suffering, distress, and/or violence. These lingerings can be viewed as extensions of their short-term equivalents, previously introduced in the Short-Term Emotional Lingerings sub-section. As interviewees moved on after closing, however, the material shifted from being in the forefront of their minds to being a part of how they viewed and interacted with the world. Even so, a number of participants noted that, once they had worked on shows that involved certain forms of human suffering, distress, and/or violence, they never forgot those forms or the issues surrounding them and never lost the connections with them.

Participants generally also retained their emotionality in relation to these forms of human suffering, distress, and/or violence, as well as the issues linked to them. When

encountering these forms and issues again in quotidian life, many participants were emotionally reactive, even to comments and actions they would have previously dismissed or ignored. For instance, a participant who had portrayed a Muslim character in a show spoke about being offended and becoming emotional now if s/he hears someone call Muslims “terrorists” (Interview 14). Several participants believed responses such as this one emerged from the fact that actors’ work provides them insight into the lived experiences of encountering these forms of human suffering, distress, and/or violence and connects them to the related political, social, and/or individual issues in a deeply personal way. This returns to the idea that actors, in some way, live through their characters’ experiences and, thus, develop stakes in associated political, social, and/or individual issues. One participant summarized that, “once you’ve done a play or experienced ... recreating that troubling story ... it’s part of your DNA” (Interview 2).

As was discussed in the Intense Emotions sub-section, confronting forms of human suffering, distress, and/or violence and the issues related to them could shake participants’ sense of the world being a safe place and reveal how fragile life can be. When this occurred, a number of participants noticed their fear levels increasing. Some reported distrusting people more, while others were more worried about losing their loved ones. The latter fear was especially of concern to parents, who were often extremely concerned about their children’s safety. One participant even admitted that, after performing in a show that included pedophilia and sexual assault, his/her fear drove him/her to become an overprotective parent (Interview 9).

Although fear, anger, and/or sadness remained with some participants, a sense of joy lingered with most too. This joy was, for many, fundamentally linked to feeling that

the representations they created had provided positive contributions to audience members, as well as society-at-large. Speaking about representing human suffering, distress, and/or violence, one participant argued that, “this is what theatre should be doing ... creating this kind of relationship and understanding would help to solve ... a lot of conflict ... it was difficult but fulfilling” (Interview 17). Of all the lingerings reported, the joy that came from this fulfillment was one of the longest lasting and was often the reason participants continued representing human suffering, distress, and/or violence, despite the emotional, physical, and financial challenges they faced.

Long-Term Character Lingerings

Participants encountered a wide temporal spread in relation to long-term character lingerings. While most participants experienced some level of long-term character lingerings, these lingerings ranged from dissipating with a few days after closing to never having dissipated. Participants whose long-term character lingerings remained for more than a few days after closing spoke about “not quite being able to shake” both their characters and the emotions they had worked with over the course of their productions (Interview 11).

What exactly could participants not shake? The most common report was that participants did not feel like themselves. One participant described the sensation as having a “residue leftover” from his/her character (Interview 2). When this occurred, participants generally continued experiencing their characters’ thoughts, feelings, and impulses. With self-awareness, time, and/or personal and interpersonal care, however, long-term character lingering generally shrank away.

There were some cases, though, where aspects of characters' journeys and views remained with participants. A strong example of this occurred with a participant who represented a character who had committed suicide but felt high levels of guilt and regret about doing so (Interview 8). During his/her shows' production process, this participant had to explore his/her character's feelings of guilt and regret, as well as be onstage for scenes where the character's devastated family members tried to cope with their loved one's suicide. While the participant had thought about committing suicide in the past, s/he described never seeing it as an option after portraying this character who did commit suicide and confronting the pain that the character's loved ones felt (Interview 8). Essentially, through representation, this participant felt s/he had linked in with the character's journey of discovery and emotions regarding suicide. In situations like this, the lingering aspects of characters' journeys or views were never in opposition to participants' own value systems.

A number of participants also retained elements of their characters' personalities after closing. In most cases, these elements were traits or approaches that participants admired and wished to possess. For instance, after portraying a powerful character, a participant who had a long history of anxiety and guilt issues found his/her character's confidence and conviction lingering on (Interview 14). These character lingerings were still with the participant at the time of his/her interview (Interview 14). The participant was grateful for the lingerings, however, having gained an increased sense of self and a grounded confidence from portraying his/her powerful character (Interview 14). While acting in general can lead to individual growth, the participant in question felt representing human suffering, distress, and/or violence had developed his/her sense of

self and grounded confidence to a greater degree than s/he had experienced when working with lighter material.

Although a number of participants encountered long-term character lingerings, no one completely lost his/her self in a character. There were, however, a few participants who reported knowing other actors who had experienced this situation. As these were second-hand reports and no participants directly encountered the situation, I do not have enough data to speak about the lived experience of losing the self in a character in the long-term. As this could be a serious health and wellness concern if it is occurring, however, I believe additional research needs to be conducted to ascertain whether there are actors who are dealing with this issue and, if there are, what the lived experience of it is.

Long-Term Interpersonal Lingerings

Thus far, I have revealed and explored a range of long-term lingerings. While I have focused on personal lingerings, there were interpersonal components that emerged from them. For instance, when participants retained elements of their characters' personalities, this altered relationships with other people, including loved ones. In fact, participants reported that long-term lingerings they were experiencing were likely to have consequences for their interactions with others.

Sometimes the lingerings and their interpersonal components were only temporary. In those cases, participants often felt that they distanced themselves from those closest to them until the lingerings dissipated or were worked through. One participant explained that, when dealing with such lingerings, “with your loved one – you

might be a little shorter ... reluctant to participate in the everyday aspects of your life” (Interview 2). Participants agreed that it could be difficult to be as engaged and open with others as usual while navigating long-term lingerings. Generally, however, participants who encountered such lingerings had at least some loved ones with a degree of knowledge about the costs of representing human suffering, distress, and/or violence and who gave participants the time, space, and/or support they needed while encountering these costs.

When there were interpersonal components of seemingly permanent lingerings, the situations that emerged could be different. For example, performer parents, as was discussed above, sometimes felt fear about their children’s health and safety, becoming hyper-protective. In one such case, a participant stated that s/he had become and remained extremely rigid about where his/her children were allowed to go and with whom (Interview 9). Although this caused tension in the family, the participant was not able to ignore the emotions and concerns that had emerged for him/her after working with representations of pedophilia and sexual abuse (Interview 9).

On the other hand, when participants took on roles that involved similar personality traits and/or circumstances to people they had tension with, some relationships were healed or strengthened. Having opportunities to see through their characters’ viewpoints and explore their circumstances allowed these participants to better understand the people they found challenging in the quotidian world. In certain cases, that understanding provided a basis for participants to change their approaches to and views of these other people.

In addition to altering specific relationships, representing human suffering, distress, and/or violence also transformed some participants' relationships more broadly. The idea that actors can develop personal stakes in the forms of human suffering, distress, and/or violence they represent, as well as the surrounding issues, has already been discussed; but, there are interpersonal aspects of this lingering that remain unexplored. When these personal stakes occurred, participants often became more vocal about and responsive to these forms of human suffering, distress, and/or violence and related issues in quotidian life. In addition, participants frequently altered their interpersonal behaviour with regard to these forms of human suffering, distress, and/or violence and related issues. Participants believed the shifts in their responses and behaviours were linked to the stakes they had developed in the forms of human suffering, distress, and/or violence and related issues, as well as to the fact that, having considered these forms and issues in their work, participants felt better able to clearly and concisely explain the related personal, socio-political, and/or ethical positions they held.

Working to create change with regard to these forms and issues, even on a small scale, became important to many participants. The first and most obvious way they did this was by increasingly speaking up about social justice and/or political issues. A strong example of this was reported by a participant who had worked on a show that included race related power dynamics. This individual explained that now, "if I hear someone saying ... some racist thing? I will say, 'You can't say that in front of me' ... And people are (crying) 'Who's the crazy lady', but [I will still speak up]" (Interview 4). This participant had even spoken up in crowds where s/he knew s/he would be met with aggression, feeling compelled to not fall silent (Interview 4). There were many other

examples of participants altering their interpersonal behaviour in this type of way. For example, one participant who had worked on a show that included representing addiction assisted a friend after recognizing addiction warning signs (Interview 8), while another participant who had been involved in a production that explored the challenges faced by Indigenous communities confronted racism whenever s/he encountered it in quotidian life (Interview 2).

Beyond these specific occurrences, many participants also felt that representing human suffering, distress, and/or violence had pushed them to be more sensitive, thoughtful, and compassionate in general. As one participant described, “[representing suffering] makes you look at people and treat them better ... Makes you want to make the world a better place ... And take a little more time to look at what is happening in the world.” (Interview 10) A number of participants echoed this sentiment, arguing that representations of human suffering, distress, and/or violence can have a positive influence on the actors who undertake them. One participant was extremely blunt about this idea, stating that representing human suffering, distress, and/or violence “makes me a better person” (Interview 8).

Costs of the Work

When speaking about representing human suffering, distress, and/or violence, all participants reported some level of intense emotions and lingerings. Many participants tried to make sense of what those intense emotions and lingerings indicated and why they occurred. This led a number of participants to speak about their work having a cost.

When exploring the nature of this cost, one idea that repeatedly arose was that representing human suffering, distress, and/or violence “exacts a tax” from those who undertake it (Interview 21). The tax was tied to the many physical, emotional, personal, and interpersonal demands actors face when representing human suffering, distress, and/or violence. Essentially, these representations require that actors give a great deal to their work, while, as one participant put it, the work simultaneously leaves its “marks on you” (Interview 4).

Several participants felt that these marks related back to the idea that actors work from themselves, a concept I addressed earlier in this chapter. Given this, many participants felt it was understandable that there would be costs related to representing human suffering, distress, and/or violence, with one interviewee explaining that, “you are using you. You’re not pretending to be anybody else; you are using your emotions and you’re using your body to do this thing; so, obviously, it’s going to affect you” (Interview 9). In addition to using themselves, actors also have to remain open and vulnerable, even while confronting some of the most difficult aspects of humanity. To do this, they have to work to avoid engaging the many defenses individuals normally use to distance and protect themselves from difficult emotions and situations.

An example of this can be seen in relation to judgment. Often, individuals judge others whose behaviour they find upsetting, allowing for a separation between “us” – people who do not behave in the upsetting manner – and “them” – those who do (Berreby 3-4). Participants, however, described not being able to portray characters honestly while simultaneously judging them. Therefore, actors have to not only remain open to their characters, but also face the fact that there are individuals in the world who commit, are

the victims of, and/or witness devastating acts. Finally, and perhaps most difficultly, actors have to confront the fact that they have the potential of committing and/or being the victim of various forms of human suffering, distress, and/or violence. While this can be extremely challenging, participants felt that, to do their work, they had to allow themselves to be touched by the material they were working with, the characters they were playing, and the potential within each human to hurt or be hurt. By doing this, though, participants allowed themselves to be affected by their work and humanity; and, in some cases, this tied into deep personal costs.

Even when the costs were great, however, participants spoke about wanting to dig deeply into forms of human suffering, distress, and/or violence in order to represent them in ways that did them justice. Many participants felt they owed this both to their audience members and to individuals who had directly experienced such forms of human suffering, distress, and/or violence. Participants suggested that, if actors are going to represent human suffering, distress, and/or violence, they need to commit to ensuring these representations are well handled and fully communicated to audience members. One participant argued that:

it is important that [representing human suffering, distress, and/or violence] costs ... if you're going to do it, I think you have got to do it and invest it with something that matters to you ... Love is not like a water tap. You can't turn it on and off. And I feel that way about human emotions ... it spills over into everyday life because ... [if] you're there for real, you can't just shut off. (Interview 18)

Many participants, however, also expressed concerns about what level of cost is healthy or required by the work. Even the participant quoted above questioned what level of cost was “healthy” or “normal”, stating,

[Representing human suffering, distress, and/or violence] can be like being crazy ... it's scary. The anxiety of needing to live through that every time ... I really admire actors who ... are excellent at what they do, and they go and they tell the truth ... and then they walk away from it ... How do you do that? How do you just release it? It holds me hostage. (Interview 18)

This participant and others were told that they should not take their work so seriously or should relax more; but, they did not know another way to work that maintained the level of quality they sought. Participants who had been told they took their work too seriously frequently encountered additional emotional distress when costs arose as they felt the costs were their fault or that there was something wrong with them and the way they worked.

Some participants openly discussed judging themselves and/or fellow actors for experiencing intense emotions and lingerings. One participant even commented that,

if a violinist strummed their bow so violently ... their bow came apart, you wouldn't consider them a good musician. And I think the same is true as an actor. If you strum your instrument to such a pitch where you are not physically able to maintain its condition, you're probably not a good actor. (Interview 12)

The idea of linking cost to quality of work, level of training, and/or talent, whether instated by self or others, left a number of participants feeling isolated and stigmatized. It

also discouraged these participants from openly admitting to experiencing costs or seeking support, even when they felt they needed it.

Interestingly, my research did not support connecting costs to quality of work. Rather, I found that all actors face costs in relation to representing human suffering, distress, and/or violence. The number and intensity of those costs cannot be anticipated based on experience or training level. The only factor that consistently reduced the number and/or intensity of costs experienced was having power in the industry, allowing one to refuse roles, and in the production process, allowing one to have a voice in when and how forms of human suffering, distress, and/or violence were approached.

Conclusion to Intense Emotions and Lingerings

Throughout this section, I explored the intense emotions and lingerings actors experience while representing human suffering, distress, and/or violence. To begin, I looked at intense emotions in the rehearsal and performance processes. From there, I moved on to the lingerings that participants encountered outside work. I addressed short-term lingerings first, then long-term lingerings. To conclude the section, I considered participants' thoughts and feelings about the costs of representing human suffering, distress, and/or violence. Having established the range of intense emotions and lingerings participants experienced, I move on to forms of attention and care in the next section.

Attention and Care

Introduction to Attention and Care

My third theme regarding the lived experience of representing human suffering, distress, and/or violence revolves around personal, structural, and interpersonal forms of care and attention. Although these forms cannot prevent the costs of representing human suffering, distress, and/or violence, many participants, especially those with the most extensive careers, argued that personal, structural, and interpersonal attention and care are integral components of a long, healthy acting career. What forms of attention and care participants employed was based on personal preference, availability, and shows' unique needs; but, without some forms in place, participants suggested that actors can find themselves overwhelmed by both industry demands and the costs of working with human suffering, distress, and/or violence. One participant summarized this, stating that, "[e]very actor's different in terms of their process of how they take care of their soul. Some take longer, some don't at all ... [and are t]ortured" (Interview 2). Another participant argued, "when you manipulate energy, as [actors] have to, you should make it part of your study, to know what it is you're doing" (Interview 21). Participants believed that actors who do not engage with forms of attention and care while representing human suffering, distress, and/or violence often turn to alcohol or drugs, become increasingly difficult to work with, or simply drop out of the industry. As this demonstrates, participants highlighted the importance of personal, structural, and interpersonal attention and care.

When working on contracts that involved representing human suffering, distress, and/or violence, participants engaged with a number of forms of attention and care, some

of which were consistent with those used by professionals in other fields. In addition, there were forms of attention and care available in other fields that participants wished were also available to them. Finally, a number of participants suggested forms of attention and care that are not currently in use, but that could be of assistance to actors engaged in representing human suffering, distress, and/or violence.

In this section, I address all these topics regarding attention and care. To do so, I first attended to personal attention and care, then to structural attention and care and interpersonal attention and care. Finally, self-awareness and flexibility are discussed. Although many forms of attention and care are referenced in this section, performers identified that they constantly develop new strategies to deal with the unique challenges that arise in various shows. Thus, it is vital to recognize that actors' attention and care landscapes are in constant states of re-negotiation. While I lay out forms of personal, structural, and interpersonal attention and care in this section, my goal is to help individuals understand actors' experiences, not to solve lingerings or cure the costs of representing human suffering, distress, and/or violence.

Personal Attention and Care

Physical Forms of Personal Attention and Care

Physical forms of attention and care were key supports for many participants. Interestingly, the physical techniques that participants employed were largely consistent across ages, genders, training, and experience levels. Participants generally found these techniques early in their careers and continued to engage with them during show after show.

Breathing techniques were widely used by participants in my study. When facing intense emotions, lingerings, or even quotidian stresses, many participants turned to breathing techniques to calm and/or ground themselves. The techniques were often simple – in some cases just breathing in and out fully, using this to release tension. In other cases, however, participants turned to more complicated techniques and/or rituals, especially when they had the time to do so and/or were in a familiar space. For example, one participant, when s/he needed to and had the opportunity to do so, would lie on the floor of his/her home, putting his/her feet up on the wall (Interview 12). This participant would then breathe deeply and think about using the air to sail away from the emotional place s/he had been in (Interview 12). While the use of breath as a form of physical attention and care and the breathing techniques discussed here are not new or revolutionary, participants demonstrated a high level of openness to and a generalized use of breathing as a personal support system.

In addition to breathing, mind/body techniques, such as meditation and yoga, were popular amongst participants. Again, these physical forms of attention and care were used by participants to calm their minds and ground themselves in their bodies. Meditation and yoga were also employed as ways to release the intense emotions of rehearsal and performance. Beyond that, many participants used meditation and/or yoga to centre themselves when encountering short-term or long-term lingerings. By creating opportunities to relax and breathe, mediation, in particular, allowed participants to enter a neutral space and, through this, assisted them in building and retaining their separation between character and self, including between character body movements and tensions and personal body movements and tensions.

On top of meditation and yoga, participants also spoke about the importance of more intense forms of physical activity. There were a number of ways that this physical activity assisted participants. The first way was helping them stay in shape. Given the demanding nature of performing, most participants felt their work required physical fitness. In order to maintain their health and fitness, participants would swim, bike, and/or workout at gyms. These forms of physical activity were also identified as ways of staying mentally focused and emotionally strong.

Physical activity can also provide some actors with a buffer between their characters and themselves. To do this, many participants built a routine for their workouts or physical activities. This provided them with some support and protection when they encountered powerful character lingerings. One participant who maintained a swimming training schedule and strongly associated swimming with his/her self and everyday life explained that getting into the pool could immediately ground him/her in quotidian movements and assist in separating from characters (Interview 2).

Finally, physical activity was used by some participants as a means of transitioning between home and work. Participants who chose to do this often rode their bicycles or walked to, feeling that this exercise gave them time for mental preparation before rehearsal or performance. These participants then engaged in the same physical activity at the end of the day, seeking decompression or separation from their work. One participant who engaged in this pre and post-work physical activity felt that it gave him/her the time and space to shift from one mental, physical, and emotional space to another (Interview 11). Several other participants echoed that traveling via bike or foot

assisted them as it provided a set time to transition between home and work. Knowing they had this time available to them was an additional support for many participants.

Mental Forms of Personal Attention and Care

While the role of physical activity in actors' health and wellness cannot be underestimated, neither can mental forms of personal attention and care. These forms, however, can be challenging for actors to engage with and maintain. Participants identified one reason for this, explaining that their mental time and energy are often consumed by their work, even while outside rehearsals and performances, or aspects of their personal lives, such as their children. When participants could find the time and energy to engage with mental forms of attention and care, though, they were extremely helpful.

As I discussed above, in my lingerings sub-sections, participants frequently found it difficult to rest or relax while working on contracts that included representing human suffering, distress, and/or violence. At the same time, however, participants described the importance of rest and relaxation to maintaining health and wellness, especially while representing human suffering, distress, and/or violence. Travel was cited by some as one of the best ways to access rest and relaxation as it provided an opportunity for a reset. By leaving behind quotidian routines and stresses, as well as the location of intense emotions and lingerings, a number of participants were able to recharge while away, returning home rejuvenated and ready to take on their next work challenge. Other participants, however, warned that traveling should not be used as an attempt to ignore or escape lingerings as these efforts are doomed to fail. One participant encountered such a

situation when s/he left town immediately after closing an extremely challenging show that sparked powerful lingerings (Interview 11). As this individual explained,

I was just going to crash a bit, read, start working ... on another script ... [but] I just couldn't do anything and I was really in this funk ... I just couldn't get motivated ... everything kind of seemed pointless. (Interview 11)

Looking back, this participant felt s/he had tried to replace experiencing and navigating through post-show lingerings with getting out of town (Interview 11). Instead of the trip assisting him/her, the participant believed that using travel as a means of escape only made the lingerings more powerful and more entrenched (Interview 11).

Travel could also be difficult for participants to undertake, as the costs could be prohibitive, especially for those with families. Time away was also an issue for many participants. The time commitment and distance involved in travel made it impossible during productions, limiting its use as a form of rest and relaxation to periods between contracts. Even within these periods, it could be difficult for participants to find time to go away as they often had personal and/or new contract responsibilities, as well as auditions to acquire future work.

Two other mental forms of attention and care that participants used and felt were easier to turn to during and between contracts were hobbies and activities. While participants engaged with a wide variety of hobbies and activities - including reading, getting manicures, going dancing, and cooking - the support they provided showed more consistency. First, regularly engaging with hobbies and activities gave some participants a way to reconnect with their quotidian selves. Second, and more widely reported, hobbies and activities allowed participants to rest their minds after engaging with

narratives and/or images of human suffering, distress, and/or violence for extended periods of time.

Not all activities and hobbies, however, were used for this second purpose. Mindless activities that provided participants with opportunities to wind down after work; relax their brains; and remove themselves from any reminders of suffering, distress, and/or violence were most commonly employed, especially following rehearsals and performances. Some of the activities participants found particularly relaxing included reading light, easy to consume books; flipping through magazines; playing computer games; and watching reality television. Participants knew they were engaging with mostly frivolous material, but reported being too mentally, physically, and/or emotionally exhausted to absorb anything more demanding. Thus, many participants sought rest and relaxation through frivolous material, allowing it to wash away the challenges and demands of the world for a short time. When working on contracts that involved representing human suffering, distress, and/or violence, however, two participants notably encountered the opposite response, feeling a need to throw themselves into activities that were mentally demanding and served a socio-political service. These participants cited needing a means to balance off their feelings that, by working as actors, they were not doing enough to help society and create a “better” world.

In addition to rest and relaxation, there were also ways of thinking about acting and theatre that participants found support within when working with representations of human suffering, distress, and/or violence. The most common and powerful thought pattern was one many participants had been taught during their actor training or early in their careers. This thought pattern centred on seeing the theatre as a safe, sacred space

outside the quotidian. There are several concepts that are often tied into this way of viewing the theatre, including: that what happens in the theatre stays in the theatre, that the fictions that are played out are reversible, that the theatre is a place where individuals can take risks without judgment from self or others, and that the theatre is a mystical space. By framing the theatrical space in this way, participants felt freer and better able to cope with the range of emotions, dialogue, and actions they engaged with through their characters, especially when representing unethical individuals or perpetrators of human suffering, distress, and/or violence.

In addition to this, the idea of the theatre as a safe, sacred space provided participants with a level of separation from their work at the end of the day. As one participant explained,

the sacred space ... is integral. [The work] stays in the theatre space. Once you leave the stage, that space is there, you go on with your life ... everything that goes in there, stays in there ... you're trained to accept that ... (Interview 5)

While, as I suggested earlier in this chapter, it is not possible for actors to create a complete separation between the fictional and the quotidian as performers are human beings, the idea of their work being tied to a specific, sacred space allowed participants to ground the material in that space, creating an opportunity for some level of separation from the work at the end of the day and some degree of shielding from the intense emotions that often arose when representing human suffering, distress, and/or violence. The specific, sacred space concept also gave participants permission to have a quotidian life of their own and to not be constantly immersed in their work, which was extremely important when representing human suffering, distress, and/or violence.

Actors also build personal rituals in an attempt to further maintain a level of separation from their work. For example, one participant always entered the theatre space early to review all his/her lines before a performance (Interview 9). Doing this allowed him/her to shift out of the quotidian world and into each show's realm (Interview 9). Other participants created music playlists for each of their characters, then only listened to the songs at rehearsals or performances as a way of moving into and maintaining characters' headspaces. The most common rituals, however, occurred during performance runs and revolved around participants' putting on and taking off their costumes and/or make-up. Engaging in such rituals provided participants with the time and ability to mark entering the fictional space and then leaving it to return to the quotidian world.

In tandem with this, participants frequently created systems to distance themselves from material involving narratives and/or images of human suffering, distress, and/or violence. This distancing occurred during production processes, as well as after completing contracts. During productions, while participants felt their distancing options were restricted, a number created techniques and systems to assist in building as much separation as possible. One technique that a number of participants used was focusing on the details of the work if a show's material became too overwhelming. These participants would ground themselves by concentrating on their lines or achieving their goals in scenes. Although participants noted that this technique provided limited support, it could be a lifeline when feeling extremely overwhelmed during a production process that involved representing human suffering, distress, and/or violence.

After completing their contracts, most participants had systems and techniques to help them separate from their work and any narratives and/or images of human suffering,

distress, and/or violence related to it. These systems and techniques included not looking at material related to the shows or the subjects dealt with within it. While the length of time for this avoidance differed from participant to participant, it was often for an extended period. Avoidance could also extend to show specific rituals or music. Although participants could not create an absolute separation from their work, the techniques they used did assist them in navigating the lingerings they encountered after representing human suffering, distress, and/or violence.

Emotional Forms of Personal Attention and Care

In quotidian life, it is common for individuals to judge or attempt to suppress their emotions. Participants reported, however, that it can be dangerous for actors to treat their emotions in these ways. Instead of judging or suppressing, then, most participants tried to accept their emotions when working on contracts that involve representing human suffering, distress, and/or violence. Participants described needing to allow themselves to cry when they were upset, laugh when they felt like it, and express their anger when it arose.

On top of that, participants identified the importance of not judging these emotional responses or any lack of emotional response. Participants noted, however, that this acceptance can be hard to achieve, especially when dealing with emotional responses that would seem unexpected (ie. laughing when working on material that involves genocide). Several participants explained that, in order to find self-acceptance in these cases, actors need to trust their responses rather than try to decide whether those responses are “correct” or “best”. When able to do this, participants stated, actors

generally feel less weighed down and are better able to work with or through any distressing emotions. In spite of participants knowing this, they often judged themselves and their own emotions, citing how difficult it is to not do so.

Even when participants were able to accept their emotions and lingerings, most still found it vital to have some method for unpacking them. Generally, this was done through some form of personal expression. For example, a number of participants wrote journals about representing human suffering, distress, and/or violence, including any intense emotions and emotional lingerings that emerged in connection with it. Other participants preferred to talk to themselves or engage in active, focused thinking to process their experiences. Participants who approached their experiences in these ways generally considered their feelings, took note of them, and then attempted to release them. While participants differed in terms of the techniques they employed to unpack their emotions and experiences, the purpose of these techniques remained the same.

One participant noted, however, that emotions can be difficult to identify and/or articulate, making them challenging to express and, therefore, unpack (Interview 20). When working with representations of human suffering, distress, and/or violence, there can also be the added complication of not being able to express certain emotions and thoughts through language as they are beyond what words can convey. In situations like these, participants emphasized the importance of actors being patient and kind with themselves, not pushing themselves if they are having a hard time expressing their emotions and experiences related to representing human suffering, distress, and/or violence. The participant discussed above explained that, for him/her, relaxing and focusing on other things for a time could be more productive than trying to force

himself/herself to express what s/he was not ready to (Interview 20). S/he stated that, “sometimes doing the dishes can unlock things ... some different aspect of what you were doing that becomes clear to you in a moment of reflection or in the shower, something like that” (Interview 20).

This participant pointed out that trying to force expression is as much a manipulation of feelings as trying to suppress them (Interview 20). Once again, acceptance comes into play. This time, that acceptance is necessary to embrace the ways in which the body/mind works rather than trying to control its responses. This may be difficult, though, as it often requires actors to face challenging emotions and to live in uncomfortable places for indefinite periods of time. Facing these emotions and accepting these spaces when they arise, however, appear to be integral to actors’ health and wellness.

Participants also argued that it is important to face emotions that arise while in character, representing human suffering, distress, and/or violence. As one participant suggested, “you’re not pushing your emotions away ... you’re letting them out” (Interview 8). By allowing themselves to fully engage with characters’ emotions without judgment or hesitation, some participants felt these emotions could be exorcised. When such full engagement was not achieved, several participants experienced an increase in the number and intensity of the lingerings they encountered. One participant tried to explain why moving through characters’ emotions is so important, commenting that, “the key thing is to go through [those emotions] rather than to be stuck in [them]” (Interview 7).

Other participants, however, were less focused on engaging with emotions in the work and more focused on what happens to the energy needed to convincingly portray characters that are tied into narratives of human suffering, distress, and/or violence. For these participants, the vital element was “clearing out” or releasing that energy following rehearsals and, especially, performances. In my *Lingerings* sub-section, I introduced a participant’s experiences with physical lingerings, including a debilitating back spasm. An F. M. Alexander Technique expert stepped in to assist and, as the participant described, “exorcised something out of my back ... [I] felt it leaving me like bundles of electricity” (Interview 21). By the time the F. M. Alexander Technique expert was finished, the participant was able to straighten his/her back for the first time since the spasm had started (Interview 21). At that point, the F. M. Alexander Technique expert explained the importance of clearing energy away after performances to prevent such severe physical lingerings when representing human suffering, distress, and/or violence (Interview 21).

While this idea is an important one, participants noted that it is extremely challenging. As actors are human beings first and foremost, the energy they create in their work cannot simply be released. Perhaps then, as with the other costs of representing human suffering, distress, and/or violence, this is more an issue of attention, care, and management than elimination. This idea is certainly in line with more recent advice the participant who encountered the back spasm had received. After a treatment for neck tension related to another show, this participant’s massage therapist highlighted the entwined nature of the physical and emotional realms and suggested making time for lightness and laughter when working on contracts that involved representing human

suffering, distress, and/or violence (Interview 21). In fact, the therapist argued that the physical and emotional impact of laughter can be profound, helping release some of the leftover energy from representing human suffering, distress, and/or violence (Interview 21).

Interestingly, laughter and humour, particularly gallows and/or dark humour, were already part of participants' go-to forms of personal attention and care. When participants were working with narratives and/or images of human suffering, distress, and/or violence, humour was a way of finding some levity and restoring emotional balance. In fact, several participants mentioned that, for them, humour was a key way to deal with the material they encountered while representing human suffering, distress, and/or violence. As I discussed previously, however, actors can experience guilt when engaging with humour, especially gallows humour. In light of this, it is not surprising that participants emphasized the importance of giving themselves permission to laugh, particularly with co-workers, when representing human suffering, distress, and/or violence.

Although humour and all the other forms of personal attention and care I have introduced thus far assisted participants, the most helpful personal support was seeing value in the work. While moving through the intense emotions and lingerings that arose when representing human suffering, distress, and/or violence, participants drew hope and support from their work's power to encourage audience members to face issues and events, potentially creating positive social, political, personal, and/or interpersonal change. Speaking about his/her choice to become an actor, a participant described that:

I have a purpose because I'm here to reflect [that life isn't easy] and to help ... there's a huge responsibility with that ... there's a validity to that and there's a

purpose to that. And there's also great joy too ... [representing t]he human experience. (Interview 2)

A sense of purpose, as is demonstrated in the quote above, and a belief in the ability for representations to help others or the world at large are key supports for actors. Participants continually returned to these two ideas when explaining why they continued to represent human suffering, distress, and/or violence despite the costs that emerged in relation to this work. During their darkest experiences, many participants reported that their beliefs in the value of acting and its role in shaping the world pulled them through. On the other hand, those who lost these beliefs spoke about becoming overwhelmed and not wanting to represent human suffering, distress, and/or violence anymore. Given its power, I will focus in more on the value of the work in chapter 5.

Structural Forms of Attention and Care

Although personal attention and care is vital, it is not the only factor involved in actors' health and wellness. Also central are the ways representing human suffering, distress, and/or violence are approached in the workplace. In this sub-section, I look at the approaches participants felt supported them, labeling these *structural forms of attention and care*.

Within a production process, control lies with the director. Given this, participants saw directors as key to the level of structural attention and care available in the workplace, especially rehearsals. As one participant identified, "Directors are very important because they set the tone for the rehearsals and the production" (Interview 2). Other participants echoed similar sentiments, talking about how directors can construct

rehearsal environments so that actors are empowered and encouraged to speak up about their health and wellness needs or are shut down.

Currently, the general feeling amongst actors is that, in most production processes, if they speak up about costs they encounter, they will be labeled as crazy, weak, or poorly trained performers. There are, however, productions where directors foster open communication. When participants encountered such productions, they reported feeling more supported and more resilient when experiencing intense emotions and lingerings. They also stated that open communication let them better address questions, concerns, and/or emotions that arose in relation to the work, and to do so with a sense of community in place. A participant described the importance of open communication in the workplace, saying that:

concentrating on going to really dark places and ... imagining ... bad circumstances can be challenging, but if you're doing that within a nurturing, supportive environment ... It can be ... challenge but ultimately rewarding...

(Interview 1)

Finally, when open communication was fostered, participants felt able to offer their co-workers more consistent and powerful forms of interpersonal attention and care.

While open communication assisted participants, an even greater level of support was created when they had agency over their health and wellness in the rehearsal process. This agency included open communication, such as being able to have an honest dialogue in relation to concerns about how a moment of violence was being approached; but, it also went beyond that as participants were able to refuse to undertake certain stagings and/or acting choices that did not feel safe for them as individuals. This level of agency

was highly unusual and, in my study, was only held by a few older, established male actors. As I addressed in my Lingerings sub-section, however, participants who had access to this level of agency argued that it allowed them to have fewer, less powerful emotions and lingerings when representing human suffering, distress, and/or violence. One participant explained the link between this agency and encountering limited costs, saying that being able to refuse a choice that feels harmful allows actors to limit their exposure to material they believe would have too great a personal cost (Interview 19). This individual further argued that this level of agency needs to become the norm in the acting industry because,

you have to make sure that you're not inadvertently harming or hurting or ... emotionally hurting a person ... you don't cause any of the suffering that you're trying to actually illustrate ... [performers] have to be able ... to say, "I don't think I'm comfortable doing this" and be in a situation in the room where ... that's perfectly valid. (Interview 19)

While agency over health and wellness in the workplace could not eliminate costs, it had an extreme impact on the number and power of the emotions and lingerings participants experienced when representing human suffering, distress, and/or violence. Given this, it should not be surprising that most participants wanted this level of agency to become the entertainment industry norm, citing that actors' health and wellness needs to be prioritized.

In spite of the impact this agency can have on their health and wellness, participants generally felt that the currently accepted power dynamics within the entertainment industry suppress it, as well as open communication. Therefore, unless

expressly told that a production would involve open communication and/or actors having agency in the process, most participants assumed they should not speak up about costs related to their work or choices they had health and wellness concerns about. Even participants who generally had agency highlighted that this is not the norm and that most actors do not feel able to honestly express whether or not they are comfortable with what happens in production processes, as they are concerned about upsetting their superiors, being labeled as difficult, or being fired.

This situation, however, can lead to significant consequences. A participant laid out what happens in spaces where actors do not have agency, explaining that:

you have directors who ... make actors cross boundaries ... it's a dictatorial process in the theatre ... the director telling you what to do ... if you don't create [an open] atmosphere, then people will end up doing things cause they think they have to or they'll lose their job ... and it will be something they're not comfortable with... (Interview 19).

According to this participant, not only can actors feel forced to cross personal boundaries, but they can also hide their limits from fellow performers, creating situations where co-workers accidentally cross boundaries (Interview 19). This can then lead to these co-workers experiencing distress if they discover they have unknowingly hurt another actor (Interview 19).

One participant provided an extreme case study regarding the consequences of boundary crossing and actors not having agency. When this participant was young, s/he was hired for a contract that included stage combat (Interview 20). During choreography, the fight director built in a stunt where the participant had to fall down a flight of stairs in

the middle of a combat sequence (Interview 20). Even though the participant said s/he had concerns about the stunt's safety, the fight director was unwilling to hear these concerns or to have any discussion regarding the choreography (Interview 20).

Ultimately, the fight director told the participant to complete the stunt or leave the show (Interview 20). The participant moved forward with the show and, therefore, the stunt (Interview 20). While working on the show, however, there was an issue with the stunt, leading to the participant breaking his/her back (Interview 20). At the time of his/her interview, this incident continued to have physical, emotional, mental, and interpersonal consequences for the participant (Interview 20). Although it would be easy to say that s/he should have left the show, the participant highlighted that s/he was a young actor and leaving could have been detrimental to his/her career (Interview 20). The participant went on to say that leaving is rarely an option as actors usually cannot risk getting shunned by the entertainment industry or giving up their incomes from contracts.

While the participant spoke up about concerns related to the stunt, not all participants felt able to even voice their concerns. This also led to boundaries being crossed. The most powerful example of this occurred when a participant of colour was given make-up by a show's production team and asked to darken his/her skin (Interview 5). Although putting on the make-up brought up uncomfortable resonances with blackface and blacking up, this participant felt s/he did not have the agency to express concerns or refuse the make-up (Interview 5). It was only after a dress rehearsal, when other members of the production team complained that the make-up was offensive, that this participant was asked if s/he was comfortable with it and was told s/he did not have to use it (Interview 5). While members of the production team told the participant that

s/he should have spoken up, s/he felt doing so could have resulted in being labeled as hard to work with, making it difficult to book roles in the future (Interview 5). Crossing that boundary, however, deeply cost this participant, who referred to the incident as “the single most traumatic experience I’ve had ... in my career” (Interview 5).

Even though open communication and agency were cited by many participants as key structural forms of attention and care, these supports remain the exception rather than the rule in the acting industry. Looking to the future, many participants wanted to see more open, supportive production environments and increased agency related to health and wellness for all professional actors. Expanding from there, participants had other areas of structural attention and care that they hoped would develop in the workplace. First and foremost, they wanted greater understanding and acceptance of the costs of both working as an actor and representing human suffering, distress, and/or violence. Participants often stated that, while knowledge and acceptance amongst actors is important, little will change until producers, directors, and other influential members of the entertainment industry learn about, accept, and give attention and care to the costs of representing human suffering, distress, and/or violence.

Making more structured supports freely available to actors who wished to engage with them was also critical to some participants. While no one wanted actors to be required to engage with such programs, a number of participants wanted the option of using such support systems at any point while representing human suffering, distress, and/or violence. One participant in particular argued that, given the financial challenges of working as an actor, the industry needs to provide greater access to attention and care, such as counseling and support groups (Interview 17). This participant believed such

forms of attention and care are necessary for actors to “bounce back every day” when representing human suffering, distress, and/or violence (Interview 17). Participants who championed these more formalized attention and care options wanted actors to be able to rely on certain support systems being available to them while representing human suffering, distress, and/or violence, regardless of their financial situations.

Interpersonal Attention and Care

The third component of support participants described was interpersonal attention and care. I now turn my focus to these interpersonal forms of attention and care in this sub-section. As with interpersonal lingerings, I discuss interpersonal forms of attention and care in relation to relationships, including co-workers, loved ones, and acquaintances.

Co-workers and Colleagues

When working on productions that included narratives of human suffering, distress, and/or violence, participants frequently found their co-workers to be key sources of interpersonal attention and care. Participants who encountered numerous intense emotions and lingerings often turned to their fellow actors for support. Through this dynamic, participants sought to unburden themselves. One participant explained that, although speaking about intense emotions and lingerings with other actors generally could not change what was occurring, “just talking about it with somebody who is affirming your instincts and your feelings ... is helpful ... it’s a sharing of human experience and so, on that level, it has the power to be healing” (Interview 21). At times, these private conversations also provide opportunities for actors who have more

experience representing human suffering, distress, and/or violence to provide less experienced actors with information about intense emotions and lingerings, as well as advice about forms of attention and care. For support and/or information to be imparted, however, both actors have to be invested in truly listening to and caring for one another (Interview 21).

There were also times when participants wanted support from their superiors. This often occurred after performances. During this time, many participants found it helpful to speak with directors and other superiors about how the performances had gone. A participant explained that engaging such an analysis “brought back ... my critical eye” (Interview 10). By entering a critical work headspace, some participants were able to step out of their characters’ experiences and look at performances from a more detail-oriented perspective. For these individuals, talking critically about the work helped distance them from lingering emotions and character elements.

Loved Ones

In addition to co-workers, participants also found support from their loved ones. While easy to overlook, simply having friends and other loved ones to discuss work with was a vital support for many participants. They would converse about both show material and working conditions. As with talking to fellow actors, these sessions with loved ones provided most participants with an opportunity to unburden themselves. This unburdening came from confiding about production processes and/or unpacking or joking about shows’ material. When they were feeling unsupported at work, talks with loved

ones also allowed participants to vent and remind themselves that there were people who cared about them.

Although some participants wanted to talk about their work, others tried to avoid doing so, needing a break from their production processes and the narratives and/or images of human suffering, distress, and/or violence being addressed within them. In these cases, participants frequently turned to their loved ones for distractions. Speaking with friends provided this for some participants, while others relied on partners and/or family members. These distractions had their limits, though, and many participants still found themselves unable to leave thoughts of their shows and its content behind.

There was one group of loved ones that provided a more complete form of distraction - children. Participants who had children, especially mothers and new parents, felt they had a powerful distraction from their work. As soon as they came home, these participants felt their focus immediately had to shift to their children, who required time, attention, and care. One participant identified that, before having children, s/he had become absorbed by his/her work whenever s/he was representing human suffering, distress, and/or violence (Interview 1). S/he would come home after rehearsals or performances only to constantly mull over thoughts and feelings related to the show and its content. After having a child, however, this participant encountered a stronger divide between work and home, finding him/herself forced to switch gears from actor to parent as soon as s/he arrived home from work (Interview 1). Other participants with children reported experiencing the same forced divide between work and home life.

On one hand, participants believed that this divide was healthy as it helped them establish stronger boundaries in relation to their work. In addition, a number of

participants found support from the fact that having children and starting a family provided an important, rewarding life element that had nothing to do with acting or representing human suffering, distress, and/or violence. In fact, a participant stated that:

I got married and had a family, so I wouldn't go home to myself, so I wouldn't be alone ... I don't know how actors that do that; I don't know what they do to debrief ... it's a challenge ... I wouldn't do this without my support group and that includes a family ... having a spouse ... and having children, and areas where I can invest myself in ... and be available to be invested in, that don't have anything to do with my work ... that keeps me from ... obsessing over something or rehashing or ... not letting go. (Interview 20)

At the same time, however, there were additional pressures that emerged for participants who had children, including feeling guilty about not being home to tuck children in at night during performance runs, worrying about lingerings being seen by children, and struggling to make ends meet, as well as being concerned about whether shows were getting the necessary time and attention. After all, while children can provide a welcome distraction at times, they do not stop needing attention and care when actors want to focus on their work or need attention and care themselves. Their children's needs and demands left a number of participants feeling that they had to make sacrifices and compromises in their work and, even more so, in maintaining their health and wellness. In spite of these challenges, though, participants with children reported deriving great joy from their families and being grounded by them.

Children were not the only sources of familial support, however, especially in relation to grounding participants. Within this realm, partners and parents were also

central figures. Participants frequently looked to their partners or parents for honest feedback about lingerings, especially character lingerings, feeling that these individuals would be the first to notice any changes. In fact, several participants suggested that I speak to their partners, stating that they would know better than the participants themselves about any character lingerings.

When lingerings did arise, partners and parents were often participants' leading sources of care. One of the forms of care partners and parents provided was being touchstones to the quotidian, helping participants ground and stay grounded in themselves. Participants spoke about how, when dealing with lingerings, especially character lingerings, they felt lost, unsure, or just not like themselves. Engaging with individuals they had long established relationships with, however, could drop participants back into themselves and their quotidian lives. For example, when one participant experienced intense lingerings, a telephone call to his/her father would drop the participant into a parent/child relationship and, through that, re-establish his/her sense of self (Interview 12). Many participants engaged in similar encounters with their partners, who they would reach out to in order to gain distance from characters and reconnect with the quotidian.

Having loved ones to connect with was especially important to some participants in the period following performances. This period could be particularly challenging or even frightening for those representing human suffering, distress, and/or violence as the emotions of the work were still close and felt like they could become overwhelming for a number of participants. This led certain participants to actively and deliberately seek out loved ones as distractions and to help ease transitions back into the quotidian. One

individual described conversations with loved ones as a post-performance “safe haven” from emotions arising from and in the work, as well as from the sense of loss this participant experienced while transitioning back into quotidian reality (Interview 8). The contact participants sought ranged from text message conversations to one-on-one discussions to group drinks.

Interpersonal forms of attention and care provided by loved ones are important aspects of actors’ support systems. As I discussed in my *Lingerings* sub-section, however, representing human suffering, distress, and/or violence left many participants not wanting to engage socially, even with those closest to them. Interestingly, even when participants did not feel up to engaging with their loved ones, simply knowing they were available to provide attention and care created a certain level of support in and of itself. Participants attributed this to the power of knowing that one is loved and is surrounded by people who can be relied upon.

Acquaintances and the World at Large

In this final interpersonal attention and care sub-section, I focus on larger social networks and situations. To address this area, however, I shift the structure of the sub-section. Unlike previous sub-sections, where I focused on forms of attention and care that participants already employed, this sub-section primarily revolves around supports participants wished were available to them. The reason for this is that participants reported there being few supports currently offered by acquaintances and the world at large.

Participants consistently spoke about the importance of acceptance, and how uncommon it was to find with acquaintances and strangers. In spite of constantly working to fit in, many participants felt unable to achieve broad societal acceptance. Explaining how this lack of acceptance would play out, one participant stated that, “I still get a little bit of trouble ... little looks here and there and the mothers ... where my son goes to school [joke with each other about me being intense]” (Interview 2). Looks, jokes, and being excluded or avoided were all consistently reported. In addition, a number of participants believed they were seen as “crazy” by numerous acquaintances and strangers. Their experiences with and beliefs about how they were seen by acquaintances and strangers left many participants with a general sense of stigma and feelings of being unsupported by North American society. A participant who had lived overseas, however, suggested that this was not the case in all parts of the world. According to him/her,

in England ... you're allowed to get away with all kinds of eccentric behaviours if you're known as an actor because they're not considered people ... they are a species unto themselves and [there is] this understanding of what it takes, in terms of how we warp ourselves physically, mentally ... vocally, for our craft ... they recognize that actors – [have] incredible demands that they place on themselves ... I think here [there's an attitude of] ... “Oh, well [you are] not very good if you can't shake it off” we're expected just to suck it up ... (Interview 11)

This participant further argued that, when actors encounter intense emotions and lingerings in relation to their work, the sense of stigma that exists in North America can become internalized, leaving actors feeling that there is something wrong with them and they should hide the costs of their work (Interview 11). Participants generally felt that, if

actors' lived experiences can be normalized, self-judgment will lessen and actors will be better able to engage with the forms of attention and care available to them.

Before this acceptance can be achieved, though, participants reported that society has to develop a better understanding of actors' work and the costs of representing human suffering, distress, and/or violence. A participant gave the following statement about what s/he thought individuals outside the entertainment industry should know about actors' experiences of representing human suffering, distress, and/or violence:

You have to go there, you have to go to that place of, "I could die tomorrow, at any moment." And to be in that all the time. Not just think about it - "Oh, that's a really bad thing" ... we see something on the news, like the horrible death of the police officer and we all [say], "Oh that poor mum and wife and child" ... we all feel that moment. Well, what you're feeling in the moment, [actors] have to do for two hours... or we have to experience that in rehearsal over and over and over again for that scene. We have to recreate that. We have to have the ... bravery to do that all the time. So it costs [us]. (Interview 2)

Currently, however, individuals outside the entertainment industry seem more focused on celebrities' lives than the work that goes into acting, especially when representing human suffering, distress, and/or violence (Interview 2). This can lead to misunderstandings regarding the challenges of acting, as well as the income and perks related to it. A number of participants wanted to make it clear that celebrities' lifestyles are the exceptions and do not reflect most actors' experiences.

In spite of concerns about approaches to actors in North American society, several participants found support in one broader relationship: their connection with a higher

power. For those who were religious or spiritual, acting could feel more like a calling than a profession. Religious or spiritual participants often felt driven or even guided to create work that could help improve the world on personal, interpersonal, and/or socio-political levels. When dealing with intense emotions and lingerings, connecting or reconnecting with the idea of being chosen to help others through acting could be a powerful form of support, as could the belief that a high power is looking after everything that happens and would not give individuals more challenges than they could handle. In addition to beliefs, religious or spiritual rituals provided another form of support. One participant, for example, found strength in a spiritual prayer s/he carried out before performances that involved representing human suffering, distress, and/or violence (Interview 21). In this prayer, the participant would ask the universe for protection from the energies s/he was using in the show (Interview 21). Spiritual connections, such as this one, allowed the participants who employed them to feel a greater degree of safety while representing human suffering, distress, and/or violence.

Characteristics that Support Engaging with Attention and Care

While, thus far, I have discussed forms of attention and care as discrete units, participants combined these forms into individual, frequently elaborate support systems. Participants identified that the effectiveness of these systems was often tied to specific characteristics. Two in particular that participants focused on were flexibility and self-awareness. Despite the popular idea that characteristics are something individuals are simply born with, I want to emphasize that flexibility and self-awareness can both be developed. Thus, in this case, biology is not destiny.

A number of participants saw flexibility as necessary for actors to receive the most assistance from various forms of attention and care. The reason given for this was that each new show brings about different challenges. Thus, forms of attention and care that previously provided support may not give actors the same level of assistance with their next shows. Due to this, participants identified that flexibility is vital for actors to navigate each show's demands, finding new forms of attention and care or altering old ones to fit new situations. Participants also found that life changes varied their access to certain forms of attention and care that had been in place or how much support these forms provided. It was only by keeping their support systems living and growing that participants found the right combination of attention and care for each of their shows, as well as their current life situations.

Flexibility was only one half of the equation for most participants as they also felt that self-awareness was key. In fact, participants framed self-awareness as the most important characteristic in relation to actors' health and wellness. The reason for this was that self-awareness helped participants to know when they needed support and what forms of attention and care to employ at any given time. In addition, participants described self-awareness as vital when first establishing a support system, as well as when building onto or altering it. Although participants identified self-awareness as a key component of actors' health and wellness, as well as the health and wellness of their co-workers, not all actors have high levels of it.

Even participants who were self-aware, however, found that they could be surprised by costs related to their work or by forms of attention and care failing to assist

them in certain situations. A participant encountered this surprise after deciding to take a vacation following his/her show closing. S/he commented that:

I thought I wouldn't have any trouble getting over [this show] and then I was really surprised that my plan of having two weeks off was probably the exact wrong thing to do. I probably just should have ... jumped into something else right away or ... taken two weeks and gone somewhere specifically to do something rather than just leave myself drifting in this kind of mess of leftover emotion from doing the show ... (Interview 11)

Despite these types of surprises, participants who identified as having a high level of self-awareness regrouped faster and found alternative forms of attention or care to utilize when necessary.

Conclusion to Attention and Care

Personal, structural, and interpersonal attention and care are integral aspects of actors' lived experiences of representing human suffering, distress, and/or violence. In order to build an understanding of the various forms of attention and care employed by actors, I first addressed personal supports. I followed this with a look at various structural forms of attention and care. Next, interpersonal forms were considered, including areas where participants wished to see more support in the future. Finally, I put forward the characteristics participants believed assisted in the development and growth of individual actors' attention and care strategies. By exploring these areas, my third core theme has been examined and, hopefully, a better understanding of the forms of attention and care

that actors employ when representing human suffering, distress, and/or violence has been achieved.

Conclusion to Chapter 4

Within this chapter, I have laid out the three core themes of actors' lived experiences of representing human suffering, distress, and/or violence. First, I considered the interwoven realities actors navigate through their work, as well as the paradoxes that emerge from these realities. Then, I addressed the intense emotions and lingerings actors encounter when representing human suffering, distress, and/or violence. To conclude, I explored the forms of attention and care actors employ or wish to have access to when representing human suffering, distress, and/or violence. With the themes laid out, I move on to my next chapter, which looks at these themes in relation to relevant literature.

CHAPTER 5 – DISCUSSION

Introduction to Chapter 5

While I made many important discoveries by directly examining the themes that were identified in my study, more discoveries remain to be revealed by exploring these themes in relation to relevant literature. That exploration is my focus in this chapter. I use the same structure as in chapter 4, opening with a look at interwoven realities, but use theoretical fields of phenomenology and theatre theory to engage in a deeper exploration of these realities. From there, I consider intense emotions and lingerings in relation to vicarious trauma studies and compassion studies, as well as previous work in theatre theory regarding compassion, empathy, and/or vulnerability. I then conclude by examining the forms of attention and care actors employ in relation to theories of ethics, vicarious trauma, and compassion.

Interwoven Realities

Introduction to Interwoven Realities

When considering the interwoven realities inherent in acting in relation to major schools of thought, phenomenology stood out to me as offering interesting, powerful resonances. To explore these resonances, I first look at acting's existence in the liminal space between fiction and quotidian. From there, the divide between the fictional and the real is further interrogated. The construct of fiction is addressed, then the real is challenged and, potentially, destabilized. Finally, I conclude the section with an examination of theories of self in light of the me/not me paradox.

Theatre as a Liminal Space

In chapter 4, the theme of interwoven realities was introduced. Essentially, when participants considered their work, they would shift between speaking about it as real, as fictional, and as both. The longer they discussed the nature of acting, the more complex the relationship between the fictional and the quotidian became, until it was apparent that participants were making the emotions and words of each show real for themselves as they were performing, yet were aware of the fact that they were acting. This, then, becomes a paradox where actors are fully engaged in the actions and emotions they are representing in order to convey them to the audience, but know they are performing so cannot be fully engaged, yet are fully engaged. Participants described this paradox, speaking about being aware that they were performing, but having to make the work real for themselves, but representing events not being the same as experiencing them in the quotidian. This loop goes on and on as the paradox continues forever.

This paradox is tied to the idea of acting and theatre existing in liminal spaces. According to this notion, acting and theatre sit neither in the real nor the fictional but the space between the two, constantly negotiating that gap. This forces actors to constantly shift where they exist as performers, leading to a series of paradoxes when there is an attempt to pin their experiences down to the real or the fictional. Richard Schechner took the idea of liminal space even further, suggesting that the theatre should actually be viewed as a “paradigm of liminality” (295). According to Schechner, theatre is liminality as theatre’s “in-betweenness” is what enables it to function and what lets the humanity contained within it shine through to audience members (296). Although Schechner

focused on theatre in general, his thoughts hold equally true for acting. In fact, his comments could have been said about my participants' experiences navigating the liminal space between character and self while representing human suffering, distress, and/or violence.

The idea of acting and theatre being the epitome of liminality has interesting resonances with ancient Greek notions of catharsis, as well as with Stanislavsky's and Grotowski's searches for truth in representation. The themes that were identified in my research and these forms of theatre theory/practice are bound together by the belief that audience members can emotionally connect to another's humanity through representation. In fact, participants in my study felt that acting and theatre forged unique connections with audience members that allowed for deeper levels of shared humanity than any other art form or means of communication could provide.

What is it about theatre and acting that allows for this depth of connection? Schechner questioned whether theatre's liminality and related power are created because the medium has the same flow as human life (296). This concept meshes strongly with participants' statements that acting and theatre are the arts of life. While other art forms and means of communication may have humanity built into their content, humanity and human experience are inherent in theatre and acting's content and structure, allowing for the powerful connection that participants in my study and theatre theorist/practitioners have identified.

While theatre and acting exist in liminal spaces, they are not the only things that live in these gaps. According to Merleau-Ponty, dreams can also be found there (*Phenomenology* 332-333). Dreams have been identified as necessary as they allow

people to work through and make sense of what they encounter during each day (Kramer 30-31). In addition, individuals are shaped by their dreams (Kramer 31). Thus, Merleau-Ponty argued that, while dreams are often positioned as being less real than waking life, they are simply experiences that occur in a different realm that exists in the liminal state between the quotidian and the internal (*Phenomenology* 332-333).

With the experience of dreaming sounding extremely close to my participants' descriptions of acting, I would suggest that theatre and acting not only capture the flow of life, but also tap into and mirror the experience of dreams. Tied to this suggestion is the idea that theatre and acting, like dreams, shape those who engage with them and help individuals digest and understand the quotidian. If my suggestion is accepted, it further supports the notion that theatre and acting are fundamentally tied to the flow of life itself.

Theatre and acting have long been seen as ways to explore, or even shift, aspects of humanity. From the ancient Greeks' employment of theatre for worship and catharsis to Grotowski's attempts to use actors to reach people's cores and shake them out of their complacency to Brecht's and Boal's utilization of theatre and acting as means for personal development and socio-political action, theatre and acting have long been considered ways of connecting with and/or challenging those who engage with them, as artists or audience members. Participants in my study strongly supported the idea that theatre and acting have power, as well as that this power emerges from theatre and acting navigating the gap between the quotidian and the fictional.

Commitment to the Idea of the Fictional

What are the fictional and the quotidian though? How stable are the poles of real and fictional? To explore such questions, I need to address both notions of the real and the fictional. I begin here with the fictional.

In order to understand why North Americans buy into the construct of the fictional and see theatre and acting as sitting within it, it is important to explore the construct's history. Within Western culture, some of the earliest and, arguably, most influential thoughts on representation and fiction appear in Plato's *The Republic*. Plato was a staunch advocate for the idea of theatre as fictional, arguing that, "the imitative poet produces... phantoms that are very far removed from the truth" (*The Republic* 605c). According to Plato, artists can only copy what has already been built by God (the only being able to create from nothing and the inventor of ideal items) and by craftspeople, such as carpenters (who build the quotidian, practical – and, therefore, real - versions of God's ideal items) (*The Republic* 595a-605c). For Plato, then, artists are solely imitators, not creators; and, as truth cannot be copied but only created, theatre and acting are limited to weaving images of truth, which are essentially fictions that mask themselves as truths (*The Republic* 605c). This belief that theatre and acting deal exclusively in images of truth rather than truth itself can be traced throughout Western culture, right up to the present day.

Although Plato's theories remain influential, they have been directly and indirectly challenged by a number of theatre theorist/practitioners who have taken more holistic, phenomenological approaches, as well as by participants in my study. Plato radically limited the idea of creation, tying it to building material that can be perceived

through the five senses, while not acknowledging the creation of emotions or experiences. Thus, there are elements that he did not consider, but which my participants highlighted as key aspects of actors' work. These two elements are imagination and humanity.

Participants spoke about imagination as a direct form of creation. This concept is in line with contemporary, holistic acting approaches. In fact, several theatre scholars have suggested that imagination and creativity be viewed as the purest forms of creation as they have the ability to invent things that have never even been thought of before and that do not require any base materials (Jones 27). If these ideas are accepted, then, within Plato's model, imagination and creativity would move artists into God's territory.

The humanity actors work with can similarly be viewed not as imitation, but as a means of forging and exploring deeper thoughts, emotions, and experiences. Certainly, participants in my study were not creating images or imitations of truth in their work, but were bringing their own humanity to the table in order to form connections amongst themselves, their characters, and audience members. In fact, as was discussed in chapter 4, participants were adamant about their work being truthful, stating that audiences would not be moved by fakery.

How can theatre and acting be based in creation, though, when repetition is integral to them? How can that repetition occur without theatre and acting becoming imitations of life and/or themselves? My participants addressed this, emphasizing that each iteration of a representation is unique. They explained that, if, for example, an actor goes into a performance trying to copy what s/he did the night before, the work will be flat and will not connect with audience members. Instead, emotions, thoughts, lines, and

actions have to be freshly discovered in each performance. Philosopher Gilles Deleuze made a similar argument, suggesting that multiple iterations are never acts of repetition because each iteration becomes something new (23-24). In fact, when looking at a series of performances, the similarities amongst them only make the differences stand out in a stark manner (Deleuze 97), revealing that each performance is, in fact, its own unique iteration. Theatre and acting work in a parallel manner in their relationships with the quotidian. By using representation, they can address humanity in ways that are similar but separate from the quotidian, allowing any points of difference to come into sharp focus. Deleuze believed that the element of similarity without sameness allows for the emergence of socio-politically transgressive creations, which challenge aspects of the quotidian by drawing attention to specific points of difference from it (3).

In spite of Deleuze and numerous other philosophers challenging the notion, actors still face arguments that representation is solely fictional and acting is fakery. Why is there such a strong societal insistence on perceiving theatre and acting in these ways? Certainly, the fact that this idea has been ingrained throughout Western culture since Plato's era at least could be one reason. There are, however, other aspects that may be in play. I will examine two of these aspects here: a fear of humanity and reinforcement of the concept of the real.

When theatre includes narratives of human suffering, distress, and/or violence, it may spark difficult emotions, thoughts, and experiences for audience members, possibly leading to discomfort, upset, or pain (Nevitt xi). In addition, the way audience members behave or how they approach the world may be challenged. Within Western society, however, emotional control and avoidance of uncomfortable or painful situations are

encouraged (Dahl & Lundgren 28). In fact, discomfort and pain are generally framed as problems that need to be resolved (Dahl & Lundgren 28). The easiest way to suppress any or all discomfort or pain in this situation is to frame theatre as fictional, even irresponsible, fun and acting as fakery, undercutting their power. Participants suggested that audience members and society at large may feel safer positioning theatre and acting in these ways. This would make sense since, if theatre and acting are framed this way, they can be consumed or dismissed at will, allowing any consequences and ethical questions to be suppressed.

It becomes easier to understand why people often doggedly support the idea that theatre and acting are fictional – at best, pretend; at worst, lying – if supporting that idea offers layers of personal, interpersonal, and societal protection against any challenging or dangerous consequences that could emerge from performances. This suppression cannot make the consequences and ethical questions disappear, however. Instead, they become constant threats, always able to re-emerge. Given this, audience members and society at large may develop an ever increasing need to promote theatre and acting as fictional and, therefore, unimportant. I will further expand on this issue in chapter 6, when I consider potential follow-up studies and the implications my study has for North American society.

In addition to self-protection, the concept of the fictional can be used to protect notions of the real. This argument is in line with Jean Baudrillard's theories, particularly those related to Disneyland. Baudrillard argued that, by framing itself as an "imaginary world", Disneyland encourages the idea that the real exists outside its walls (12). It does this by emphasizing its role as one half of the real/fictional dichotomy. In any dichotomy,

the two opposing elements require one another. Just as Heidegger spoke about how the self can only exist in relation to a non-self (85-86), notions of the real rest upon a not real: the fictional. The simplest way to re-enforce the real and its boundaries, then, is to emphasize the fictional and create powerful, clear boundaries for it (Baudrillard 12). There are many ways this can be done by businesses, artists, audience members, and/or society at large. For example, at Disneyland, the entrance and exit establish obvious boundaries, dividing the real and the fictional (Baudrillard 12).

The theatre is also framed as separate from the quotidian, having a specific time and space of its own. Once that time and space are left behind, the cast, crew, and audience members re-enter the quotidian. For those who see the theatre as fictional, there would seem to be clear boundaries between that fiction and the real. If the theatre is not approached as fiction, however, and if my participants' statements about truth in acting are accepted, then the fictional itself can be destabilized and individuals' abilities to buy into a real can be undermined. Given this, individuals and society at large may cling to the ideas that theatre is fictional and acting is fakery, protecting the real from being compromised. This is in line with Peter Holland's observation that there is a fear of acting in Western culture and that this fear is "an expression of the fear of being unable to separate the real from the counterfeit" (63).

The Real and the Real/Fictional Divide

The complexities of theatre's and acting's interwoven realities are only enhanced when phenomenologists' thoughts regarding the real are brought into play. While philosophers in other fields often explore questions of what the real is, phenomenologists

focus on subjectivity and destabilize notions of the real, two topics that resonate strongly with my participants' lived experiences of representing human suffering, distress, and/or violence. As I discussed in chapter 2, phenomenology works from the premise that subjectivity is all there is as it is the only means through which humans can engage with the worlds they encounter (Bullington 20). If it is not possible to ever step outside our own subjectivity, then we cannot access a real, which is based in the idea that there is an objective reality, which, if it exists, we also have no access to.

In his work, Rene Descartes was obsessed with the real, including if it exists, if we can access it, and if it can be separated from a definitive fiction. In essence, Descartes made it his mission to find a truth that could be proved with absolute certainty, one piece of objective reality that could be branded as “real” (16). The more he worked to establish what is absolutely, certainly real and what is not, however, the more linked these two poles revealed themselves to be, leading Descartes to conclude that, “Perhaps ... nothing is certain” (16). As this quote reveals, by this point, Descartes could not be certain about whether or not anything can ever be certain. This notion resonates with participants' reports about the complexities of navigating acting's interwoven realities.

Descartes' conclusion and other phenomenologists' position that human beings can only engage with the world through their subjectivity suggest that, even if there is a real, individuals have no way of accessing it. In spite of our inability to objectively know if there is a real and, if so, what it would be, the term continues to be used. What, then, are individuals referring to when they reference *the real*? In my study, participants used the term *real* to refer to the quotidian realm.

Merleau-Ponty described this realm as the “world of perception”, as it is a place that individuals can only interact with through their senses (*The World* 31). Rather than seeing this realm as the real, and, thus, suggesting that all other realms are not, Merleau-Ponty promoted the idea that there are many realms, all of which have the potential to be locations of meaningful experiences (*Phenomenology* 338). The quotidian is then simply one realm (*Phenomenology* 338). It is a subjective and intersubjective space with an accepted series of conventions, such as being understood through perception based in the senses (Merleau-Ponty, *The World* 31). This concept, though complex, is extremely important to my study since, if accepted, it removes the real/fictional hierarchy and helps make sense of the paradoxes my participants experienced in relation to their work.

During their interviews, participants identified a hierarchy of realms, with quotidian experiences holding more weight than experiences that occur while acting. Some participants even compared their personal and interpersonal costs to those of individuals who had “really” lived through events similar to those being represented, declaring that emotions, experiences, and costs emerging from acting are less meaningful than those emerging from quotidian situations. As was discussed in chapter 4, the entertainment industry promotes this hierarchy, encouraging actors to engage with the truth of their characters’ emotional journeys and each moment of performing, while arguing that, at the end of the day, actors should simply be able to release their work with no cost to themselves, even when representing human suffering, distress, and/or violence. Underlying this belief is the argument that actors’ experiences are fake, looking like truth but never truly being it.

In a way, it is understandable that emotions, experiences, and costs related to acting would be viewed as less than those emerging from the quotidian as acting involves the element of reversibility. For example, unlike death in the quotidian realm, if a character is killed, the actor playing him/her stands to bow and continues on with quotidian life after the show. While this is a significant difference, trying to compare and rank the lived experiences and costs of the quotidian versus acting undermines what is encountered in both. On top of that, it creates expectations about what experiences and costs are “proper” in each realm, which – as my study has shown – can lead individuals to feel pressured to conform to these expectations. If these individuals cannot achieve this conformity, they often encounter guilt, fear, and/or stigma.

Participants frequently stated that not ranking realms would diminish the experiences of individuals who had encountered great suffering, distress, and/or violence in the quotidian. Although it is admirable to want to support these individuals and not draw attention away from what they have lived through, participants’ positions implied that compassion and care are finite resources, requiring that experiences be ranked and judged so appropriate levels of compassion and care can be doled out. To give attention and care to others, however, does not have to come at the expense of giving attention and care to oneself. Similarly, it is possible to engage with personal attention and care without prioritizing it over interpersonal attention and care at all times or drawing attention to it in all settings.

In spite of this, Western society promotes that there is and should be a ranking of forms of suffering, distress, and/or violence and that, in order to respect others who have encountered “worse” situations, individuals need to respond to any form of suffering,

distress, and/or violence they encounter in a way which matches their position in the ranking (Govier 63). Social comparisons, such as these rankings, however, can lead to individuals reducing their emotions and costs to what they deem to be societally “appropriate” levels (Harvey & Miller 151-152). At its most extreme, this can become a way of erasing uncomfortable or difficult emotions, forcing individuals to hide any costs they encounter and driving them away from attention and/or care under the premise that it would be selfish to speak about costs or to engage with support systems when others “have it so much worse”.

I propose that this is a dangerous idea as it encourages personal and interpersonal stigma, which my study and others show promotes additional costs and decreases resilience. In actuality, individuals who do not acknowledge their own costs and engage with forms of attention and care are less likely to be able to help themselves or others in the long-term (Slocum-Gori et al. 177). Approaching each individual’s lived experience with human suffering, distress, and/or violence in any realm as unique and worthy of attention and care, if sought, would actually promote more compassion and would foster us all being able to acknowledge costs, as well as give and receive support, without the judgment that is currently encountered. I return to this idea in chapter 6, when I consider the larger implications of my research.

Looking to phenomenological theories, a potential path emerges for moving beyond the current hierarchical approaches to experiences in various realms or worlds. In addition to opening up the idea of multiple worlds existing, Merleau-Ponty explored some of these worlds, including that of dreams. As I previously laid out, similarly to acting, the emotions and situations occurring in dreams are generally fully engaged with

during the dreaming and may appear to be aspects of the quotidian realm or world of perception (Merleau-Ponty, *Phenomenology* 332). Often, it is only upon awaking that the divide between the world of dreaming and the world of perception can be sensed (Merleau-Ponty, *Phenomenology* 332-333). Thus, Merleau-Ponty argued that, as dreams are experienced and fully engaged with, they become parts of us as surely as experiences in the quotidian do (*Phenomenology* 338).

Applying this argument to my study, theatre and acting may be perceived as aspects of a world of imagination or a world of creation. Viewing theatre and acting in this light makes space for the idea that they are not fictions seeking to replicate the world of perception. Instead, they are creating other forms of experience that remain apart from the world of perception, yet shape the lives and selves of the actors (and audience members) who encounter them. By moving from a vertical, hierarchical understanding of realms to a horizontal, multi-world concept, space is created for actors' lived experiences of representing human suffering, distress, and/or violence to be viewed as meaningful without devaluing encounters with similar situations in the world of perception. Thus, seeing acting and theatre in this way frees them from the dualities of real/fictional and truth/lies.

Theories of Self and the Me/Not Me Paradox

Looking at relevant literature in relation to the me/not me paradox I introduced in chapter 4, questions of the self and selfhood immediately arise. In chapter 4, I addressed the relationship between actor and character, as well as the blurring of the two. Ultimately, when this blurring occurred, a paradox was created such that participants

identified themselves as both being and not being their characters. This had implications for some participants' understandings of self.

Generally, in Western society, there is a sense of the self being, at least partially, solidified. For example, many people speak about there being actions they could never take and statements they would never make. Over the course of their careers, however, actors not only engage with such extreme actions and statements, but do so without judging their characters. In fact, part of actors' work is to find ways of mentally and emotionally understanding characters' actions and statements; and, many participants explained that they could only achieve this if they did not judge said actions and statements, as well as if they believed that "we are all capable of everything" (Interview 19).

While this belief is vital for actors, it removes a level of self-protection imbedded within the current Western approach to self. This approach suggests that there are "good" people and "bad" people. Those who consider themselves good can tell themselves that they would not take bad or "evil" actions such as, for example, committing murder, nor would they be able to relate to someone who has engaged in such actions. Through representing human suffering, distress, and/or violence, actors lose the ability to say they cannot understand or relate to individuals who, say, commit murder. A number of participants struggled with this, as well as with questions about what their ability to convincingly play perpetrators of suffering and/or violence could mean about their selves.

Those selves could be further shaken by the belief that we are all capable of everything, an idea that meant participants lost the ability to declare that they could never engage in certain actions. This idea was challenging for many participants in my study,

especially when they felt society-at-large would judge them for their ability to understand and empathize with anyone, as well as the belief that people are capable of anything. In the most extreme cases, participants questioned whether solidified notions of self were correct and they were simply bad people for not having limits on their understanding and empathy.

As well as removing a layer of protection in relation to the self, actors' belief that people can do anything strips away a form of self-protection connected to others. Solidified notions of self suggest that there are "good" and "bad" people; and, in order to stay safe, individuals simply have to correctly separate the good from the bad. No matter one's opinion about this idea, it does provide self-protection by allowing most people to believe that those close to them are good people who could never hurt them. Actors, however, remove this protection. After all, if all people are capable of anything, one can never be certain of individuals' behaviour. Even loved ones are then seen as capable of inflicting suffering, distress, and/or violence. Having to confront this is one reason many of my participants reported that the world seemed like a more dangerous place after they started representing human suffering, distress, and/or violence.

While actors' notion that people are capable of anything can be challenging, it is certainly in line with phenomenological approaches to self. Of the four major phenomenological theories of selfhood – put forward by David Hume, Immanuel Kant, Edmund Husserl, and Jean-Paul Sartre – only one involves a self that is personally encountered and that shapes future experiences. That is Husserl's theory. As he explained, "I exist for myself and am constantly given to myself, by experiential evidence, as '*I myself*'" (qtd. in Rogers 44). Since this theory structures the self as a

product of personal consciousness and experiences, it would appear to imply that any limits on individuals' thoughts, feelings, and actions are self-constructed.

The other three theorists went even further than this, suggesting either that the self does not exist or that it is superimposed onto experiences that have already occurred. Hume took the most extreme position, arguing that what is defined as the self is actually just a narrative applied to a collection of various perceptions and experiences (252). For Kant and Sartre, however, the situation is more complex. Both spoke about the requirement for a self to exist for experiences and perceptions to occur (Gomes & Stephenson 7; Sartre 53). This self is not set nor pre-determined in their eyes, though, and does not shape future experiences (Gomes & Stephenson 10-11; Sartre 53). Rather, it is a culmination of all the perceptions and experiences an individual has encountered; and, as such, it is always in a state of flux (Gomes & Stephenson 6; Sartre 53). The idea of who we are, then, simply comes out of reflecting on past experiences and trying to find elements that transcend and unify those singular moments (Gomes & Stephenson 6; Sartre 53). By structuring the self in this way, Kant and Sartre left it as a framing device for experiences rather than a shaper or creator of them.

Hume, Husserl, Kant, and Sartre all established notions of the self that are not as rigid as the self has generally been presented to be in North American culture. Here, people tend to identify themselves as having specific traits that control their choices and actions. The phenomenological self that is based in reflection, however, suggests that in each moment, people can say or do anything. Sartre illuminated why this is the case, stating that:

the *I* never appears except on the occasion of a reflexive act. In this case, the complex structure of consciousness is as follows: there is an unreflected act of reflection, without an *I*, which is directed on a reflected consciousness. The latter becomes the object of the reflecting consciousness without ceasing to affirm its own object (a chair, a mathematical truth, etc.). At the same time, a new object appears which is the occasion of an affirmation by reflective consciousness ... This transcendent object of the reflective act is the *I*. (53)

Within this approach, the self emerges only after experience and action. It does not drive either. What exactly is encountered in the moment then? According to Hume, what individuals actually experience is perception. He suggested that,

when I enter most intimately into what I call *myself*, I always stumble on some particular perception or other, or heat or cold, light or shade, love or hatred, pain or pleasure. I never can catch *myself* at any time without a perception, and never can observe anything but the perception. (Hume 252)

Phenomenologists' thoughts, thus, undermine notions of the self as solidified and limiting.

These thoughts also resonate in interesting ways with actors' acceptance of the idea that people can say or do anything. In fact, phenomenologists would likely see the understandings of self put forward by my participants as more accurate than those commonly endorsed in North American society. After all, if the phenomenologists' approaches to self outlined above are accepted, there would seem to be no question that individuals are capable of anything, even though they may not ultimately chose to do everything. Accepting this view, however, also means accepting the potential for self and

others to be unpredictable. I will return to this topic of unpredictable selves and others – and the fear currently surrounding them – later in this dissertation.

In the meantime, phenomenologists' theories of self can be used to reflect on actors' experiences of the me/not me paradox. My participants spoke about how they brought their humanity and aspects of themselves to their characters. In addition, they reported that characters stayed with them, becoming a part of them after shows closed. Phenomenological theories of self would similarly suggest that characters become a part of the actors performing them. After all, if the self is a collection of experiences and perceptions or emerges from experiences and perceptions, and if, as my participants argued, actors truly engage with characters' experiences and perception over the course of a production, then it only makes sense that these characters and their journeys would become a part of the selves of the actors who represent them. Thus, the characters that both are and are not actors' selves can also shift those selves as these characters and their journeys become part of the experiences of the actors representing them.

Conclusion to Interwoven Realities

Within this section, I further explored the interwoven realities reported by my participants. I looked at these realities and the paradoxes arising from them in relation to phenomenological theories. The section opened with notions of acting and the theatre as existing in liminal spaces. Following that, I destabilized the real/fictional dichotomy. In order to do so, I first considered and questioned the fictional. Then, I similarly analyzed and challenged the real. Finally, the section concluded with a look at theories of selfhood

in relation to the me/not me paradox. With this material established, I continue on to look at the theme of intense emotions and lingerings.

Intense Emotions and Lingerings

Introduction to Intense Emotions and Lingerings

With interwoven realities having been explored, I now shift to addressing intense emotions and lingerings in relation to relevant literature. First, I discuss areas of overlap between my participants' reports about their experiences and the conclusions drawn from studies conducted in the compassion and vicarious trauma fields. Following this, I challenge the medical model promoted within vicarious trauma studies. I draw on compassion studies to introduce an alternative framing through which the costs related to representing human suffering, distress, and/or violence can be understood. I then conclude with an exploration of how this alternative framing relates to the themes that were identified in my research. Throughout this section, I draw upon literature from vicarious trauma studies, theories of care, and compassion studies, as well as the work of Michel Foucault, Erving Goffman, and Margrit Shildrick.

Overlap with Vicarious Trauma Research

In chapter 1, I argued that vicarious trauma research cannot simply be applied to actors' lived experiences of representing human suffering, distress, and/or violence without research support. Having conducted my study with professional actors, looking at their lived experiences of representing human suffering, distress, and/or violence, I have

discovered some points of overlap between my participants' reports and vicarious trauma research. In this sub-section, I explore the points of overlap I have identified.

Why are these areas of overlap worth noting and exploring, especially given how strongly I have emphasized the dangers of applying material from vicarious trauma research directly to actors? Certainly, I am not arguing that points of overlap mean vicarious trauma research can be indiscriminately applied to actors and their experiences. There are, however, three reasons identifying points of overlap between the second core theme that was identified in my study and vicarious trauma research can be of assistance. First, vicarious trauma research has often focused on specific professional fields. Similarly, my research focused on professional actors. By looking more broadly at points of overlap between my study and vicarious trauma research, it may be possible to find areas of shared humanity and to begin making sense of patterns in the consequences of working with narratives and/or images of human suffering, distress, and/or violence. Second, when the idea of actors encountering costs related to representing human suffering, distress, and/or violence is dismissed, this dismissal is generally based on the grounds that acting and theatre are not based in the quotidian and, therefore, cannot carry costs. Addressing points of overlap demonstrates that there are similarities between actors' experiences and other professionals' experiences when working with narratives and/or images of human suffering, distress, and/or violence, challenging the notion that costs do not exist for actors or are less significant than those encountered by other professionals. Finally, points of overlap between my second theme and vicarious trauma research must be established in order for me to challenge vicarious trauma studies' medical model – a feat I take on in the next sub-section.

The first, and strongest point of overlap, is related to the centre of my and others' research studies. At the centre of my three core themes is the idea that representing human suffering, distress, and/or violence costs the actors who undertake it. In the words of one interviewee, representing human suffering, distress, and/or violence "exacts a tax" (Interview 21). This conclusion can also be seen in vicarious trauma research that has focused on a variety of professional fields, including nursing, policing, teaching, and counseling. This is not surprising as the concept of trauma is based in the idea of costs. Therefore, when researchers have reported that their participants demonstrated the symptoms of vicarious trauma in relation to their work, these researchers have implied that their participants encountered career-related costs.

In addition to there being a core concept overlap, there are also points of overlap between the costs reported by my participants and participants in vicarious trauma studies. The costs identified in vicarious trauma studies include:

intrusive imagery, nightmares, increased fears for the safety of oneself and loved ones, avoidance of violent stimuli in the media ... irritability, and emotional numbing ... emotional and physical depletion, a sense of hopelessness, and a changed world view in which others are viewed with suspicion and cynicism ...

(Bober & Regehr 2)

These costs show a great deal of overlap with my second core theme, which I introduced in the last chapter. This overlap would seem to indicate that a simple divide cannot be created between actors and other professionals who work with human suffering, distress, and/or violence. At the same time, there are also important points of difference and I am not suggesting that actors are being traumatized by their work. Before addressing these

points, however, I will explore two key resonances between my themes and vicarious trauma research.

The first resonance revolves around the idea that past experience with personal and interpersonal costs related to encountering human suffering, distress, and/or violence does not allow for a prediction regarding individuals' present and future responses to human suffering, distress, and/or violence. This lack of predictability appeared across a range of studies, including my own. As I found, other researchers discovered that individuals who had past, personal encounters with human suffering, distress, and/or violence could find their past experiences re-emerging when they confronted similar narratives and/or images in the workplace (Bell et al. 465). This was not true in all cases, however. There were also individuals whose past, personal experiences with human suffering, distress, and/or violence provided them with tools and resilience they employed when they came across similar narratives and/or images in a professional setting (Bell et al. 465).

On the other hand, not having past, personal experience with human suffering, distress, and/or violence did not guarantee individuals would encounter fewer, less intense costs when dealing with such narratives and/or images in relation to their work (Brady et al. 387). In fact, these individuals could find the narratives and/or images both surprising and destabilizing (Brady et al. 387). In their study with therapists, Brady and her colleagues demonstrated that, while some therapists who had experienced suffering or violence in their own lives could have personal memories triggered by working with other survivors, therapists who did not have such experiences could encounter additional

personal distress related to feeling like an outsider and, therefore, being unable to provide adequate understanding and support to their clients (387).

Certainly, there were participants in my study who felt distress related to not having direct knowledge of their characters' experiences and/or who encountered shock at confronting levels of human suffering, distress, and/or violence they had not previously known. For example, as I previously introduced, one participant reported having his/her world shaken while representing a character whose life experience was radically different than the actor's own (Interview 6). Growing up in a sheltered family, this participant reported no past, personal experience with human suffering, distress, and/or violence, beyond low level, quotidian frustrations and issues (Interview 6). When s/he took on a character whose life was filled with suffering and violence, this actor's understanding of the world was disrupted. During his/her production, s/he became extremely upset, felt destabilized, and did not know how to work with and through this level of suffering (Interview 6). Thus, intense emotions and powerful lingerings related to representing human suffering, distress, and/or violence are not exclusive to individuals with similar past, personal experiences.

Just as there were individuals with and without past, personal experiences with human suffering, distress, and/or violence who encountered extensive costs in relation to their work, there were individuals with both of these backgrounds who encountered limited costs when confronting narratives and/or images of human suffering, distress, and/or violence. In addition, even those who tended to be deeply challenged by their work did not always experience the same level of costs. This was clear in relation to my study, where participants identified that the costs they encountered could shift not just

from production to production, but also from performance to performance. Even my participants could not predict the costs they would encounter at any given time or on any given show.

This lack of predictability has also been consistently found in vicarious trauma studies (Yehuda et al. 1311). The fact that there is currently no accurate way to predict professionals' responses to working with narratives and/or images of human suffering, distress, and/or violence has important ethical implications within the acting industry. In chapter 1, I introduced the fact that some entertainment professionals have argued that, instead of producers supporting actors when they are working with narratives and/or images of human suffering, distress, and/or violence, actor should simply not take roles that could carry too great a cost for them. In addition to the ethical issues that have already been addressed in relation to this strategy, I have demonstrated that it has questionable efficacy, making it even more ethically problematic. Thus, it is vital that entertainment professionals consider the potential costs for all actors engaged in representing human suffering, distress, and/or violence, as well as understand the wide spectrum of vulnerability and resilience that emerge in relation to these representations.

Although a clear connection between past, personal history and present costs could not be substantiated, there was one situation where personal experience did have a direct impact on participants' number and intensity of costs. This situation was when the human suffering, distress, and/or violence participants were representing overlapped with a situation presently occurring in their own lives. For example, one participant was working on a show where another main character died and the participant's character gave the eulogy at the funeral. During the rehearsal process, the actor playing the

character who died suddenly passed away. For the remainder of the rehearsals and performances, the participant experienced more intense costs as s/he could not perform the eulogy scene without thinking about the actor who had passed away. Participants who had experienced personal and professional overlaps, such as this one, identified that, when their work and life overlapped, they were left having to represent a form of human suffering, distress, and/or violence that they were still trying to process as people, leaving them more vulnerable to being absorbed by it. A participant emphasized, however, that it is not unusual to be more vulnerable to material that reminds one of a personal suffering, while actively grieving that suffering (Interview 19). While overlapping personal and professional experiences of human suffering, distress, and/or violence had significant consequences for my participants, similar situations have not received much attention in vicarious trauma research. This would appear to be an area where additional research, both in relation to actors and other professionals, could be pertinent.

Another area where future research could be of assistance is in relation to perpetrators of and witnesses to human suffering, distress, and/or violence. As was introduced in chapter 2, most vicarious trauma research has focused exclusively on the impact of engaging with trauma survivors' narratives and/or images of suffering, distress, and/or violence (Trippany et al. 32). Participants in my study, however, emphasized the challenges that can arise when working with such narratives and/or images related to perpetrators of or witnesses to human suffering, distress, and/or violence. In fact, in many cases participants found representing perpetrators of human suffering, distress, and/or violence more challenging as they faced stigma from themselves and others around their ability to empathize with and understand these characters. Given these findings, I believe

it is important to further explore non-arts professionals' lived experiences of engaging with perpetrators of or witnesses to human suffering, distress, and/or violence.

Challenging the Vicarious Trauma Model

Although there were points of overlap between my study and vicarious trauma research, my participants shied away from or outright rejected the language and approaches of vicarious trauma research's medical model, raising concerns about being labeled or judged. Along with these concerns, participants worried about being stigmatized, losing work opportunities, and/or being pathologized. In many cases, these worries made participants protective of their experiences. When first meeting me, several participants emphasized that they were not traumatized by their work and asked for assurances that my study would not be framed through vicarious trauma research's medical model. It was only after these assurances that they were willing to open up about their lived experiences of representing human suffering, distress, and/or violence. This speaks to the high level of trust actors can require to open up about costs related to their work.

This apprehension about being pathologized is not unique to actors and, in fact, has received significant attention from scholars who have explored the medicalization of society. Constanze Quosh and Kenneth J. Gergen argued that defining experiences as traumas, and trauma as a medical disorder, has been established and reinforced by the mental health industry (97). This industry defines what constitutes trauma, as well as what level of functionality or distress is "normal". Peter Conrad expanded on this, stating that, "[m]edical designations are increasingly defining what is 'normal,' expected, and

acceptable in life” (149). He further suggested that, in Western society, control of what is “normal” and what is “abnormal” has emerged through human differences being pathologized, allowing them to be labeled, diagnosed, and treated (Conrad 148). These processes, then, have created and continue to enforce power differentials based on a medical expert/docile patient dynamic (Quosh & Gergen 97).

These power dynamics and how quickly individuals can be labeled and placed within them made many of my participants uneasy. Scholars’ writings in other fields have supported this unease. Quosh and Gergen wrote specifically about how individuals lose personal power after being pathologized, as well as the fear that can be associated with this loss of power (97). Foucault also addressed this fear, arguing that the idea of health promoted within the medical system has long been used as a way of controlling and constraining individuals and their bodies (170). Within this system, individuals are indoctrinated into believing that it is their duty to strive for “optimal health”, and that not achieving it is a form of failure (Foucault 170). What constitutes optimal health, however, is defined and enforced by medical and societal institutions (Foucault 170). Individuals are not given an opportunity to engage in a dialogue about their functionality with the medical industry, working to build personalized understandings of health. Instead, definitions of health, and the labels of *unhealthy* or *traumatized* are made with little or no input from the individuals on the patient side of the medical power dynamics.

Margrit Shildrick argued that this situation establishes an “us and them” mentality and reinforces societal expectations that those declared “abnormal” or “unhealthy” will follow prescribed treatments until they are deemed “better” or can be legitimately rejected and/or isolated (68). In this way, constructs of power are maintained and the idea

of normal and “healthy” as desirable is protected (Shildrick 68). At the same time, abnormality, illness, and poor health remain constant threats since they can challenge the desirability of normality (Shildrick 68). Thus, institutions must always work to maintain the structures and hierarchy that the medical model has constructed.

One of the ways these structures are maintained is through controlling difference. A leading means of controlling difference is through stigma, a concept Erving Goffman carefully explored in his work. He described stigma as “an undesired differentness from what we had anticipated” (Goffman 4). Being classed as traumatized or a trauma victim can lead to stigmatization as individuals with such labels applied to them come to be viewed as unable to function normally or “properly” (Harvey & Miller 188-189). In the case of my participants, this stigma was often seen to include being judged as weak and/or unable to handle the demands of professional acting, both of which fall squarely into Goffman’s understanding of stigma.

Encountering such stigma can lead actors to internalize the idea that, in order to be healthy and “capable”, they need to be able to fully engage with their characters while working, then immediately step away with no lingerings after. Those who do not meet this construct of “health” may remain silent about their experiences or only speak about them after trust has been established. Certainly, the latter was true for many participants in my study, as was demonstrated by their seeking assurances that opening up about their experiences would not lead to me labeling them as traumatized. Actors not feeling able to open up in many situations, however, means that few or no experiences that counter the assumed norms are openly discussed. Thus, while all my participants reported encountering intense emotions and lingerings when representing human suffering,

distress, and/or violence, actors who openly admit this within the industry or in public often face immediate stigma, being seen as unhealthy and/or unable to handle the demands of professional acting. As this shows, the medical model is currently reducing dialogue about actors' lived experiences of representing human suffering, distress, and/or violence, suggesting that it is time to consider other health and wellness models that could be more supportive and empowering.

Another weakness of the medical model in relation to actors' lived experiences of representing human suffering, distress, and/or violence is its almost exclusive focus on the challenging aspects of these experiences. Within vicarious trauma research, little space has been given to rewards individuals can encounter in relation to working with narratives and/or images of human suffering, distress, and/or violence. Thus, opportunities for learning, joy, and growth have frequently been ignored or glossed over. Instead, theory and practice have focused on diagnosing and treating medical problems in order to "repair damaged individuals". While vicarious trauma research has concentrated on distress, every participant in my study spoke about both the challenges and rewards of their work. Scholars who have critiqued the medical model have supported addressing both individuals' challenges and rewards in relation to their health and wellness. For instance, Quosh and Gergen argued that, "Without denying the ... suffering [of individuals], there can be a parallel emphasis on resilience and resources" (106).

Scholars have also raised concerns about the role of diagnosis when the medical model is employed. Within this model, individuals need to be diagnosed with a health problem in order to receive attention and care. Thus, a specific set of "signs" and "symptoms" culminating in a certain level of distress is required. Until individuals

encounter such a set of signs and symptoms – or can have it ascribed to them – and can be declared *traumatized*, little information or support is available to them. This tight focus can make costs that do not line up with or reach the required level for diagnosis of a medical condition invisible, potentially limiting or eliminating the information, attention, and care available to professionals who experience such costs or who wish to avoid being pathologized.

While participants in my study generally avoided the vicarious trauma model and being pathologized, they identified the importance of the costs of representing human suffering, distress, and/or violence being acknowledged and attention and care being made available to all actors. By providing space for a range of costs with a variety of intensity levels, a non-medical model can address all actors' health and wellness, doing so in a way that empowers them. This would meet my participants' position that, rather than seeing people as traumatized and needing medical intervention or health, costs should be considered on a continuum so all experiences are accepted and supported. Participants also wanted an approach that does not inherently position all costs as wrong or unhealthy. A non-medical model can do this, shattering the normal/abnormal, healthy/unhealthy dichotomies set up in the medical model (Frick et al. 52-53).

Even within vicarious trauma studies, some scholars have raised concerns about limiting the focus on costs related to working with narratives and/or images of human suffering, distress, and/or violence to those who can be diagnosed and labeled as *traumatizing*. Part of the concern has been that meta-analyses have demonstrated that, while many research participants who have worked with narratives and/or images of human suffering, distress, and/or violence have reported experiencing costs that are

considered signs and symptoms of secondary and vicarious trauma, these costs often did not “markedly [interfered] with functioning” - a requirement for a vicarious trauma diagnosis (Bober & Regehr 2). Given this and the themes that were identified in my research, vicarious trauma models appear problematic.

It is also important to remember that, while the idea of trauma is widely accepted in contemporary Western culture, understandings of the cost of working with human suffering, distress, and/or violence are not uniform across cultures or history. Even in Western culture, post-traumatic stress disorder, the disorder from which vicarious trauma and vicarious traumatic stress disorder emerged, is under fifty years old (Conrad 149). This is not to say that costs related to engaging with human suffering, distress, and/or violence began less than fifty years ago. It does, however, show that these costs have not always been understood or approached through the medical model. Thus, the medical model should not be taken as an absolute or as the only model available to discuss costs related to working with narratives and/or images of human suffering, distress, and/or violence.

The Compassion Lens

Given how problematic the vicarious trauma model has been in considering actors' lived experiences of representing human suffering, distress, and/or violence, it seems productive to explore my second core theme through an alternative lens. Looking at the available approaches, a compassion-based model stood out to me. Therefore, I explore the basics of compassion in this sub-section, before moving on to consider a compassion-based model of approaching costs in the next sub-section.

While there are variations in understandings of compassion, the core ideas related to it tend to remain consistent. What are these core ideas? The first is that compassion is based in care for an other (Schantz 51). As Maria L. Schantz explained, compassion involves feeling for and with “the sorrow or trouble of one’s fellow man” (51). That feeling for and with is based in allowing oneself to be vulnerable to and touched by others’ experiences, while still not becoming so absorbed in them that one loses the self in the other (Schantz 51). As Henri Nouwen, Donald McNeill, and Douglas Morrison, identified,

Compassion asks us to go where it hurts, to enter into places of pain, to share in brokenness, fear, confusion, and anguish. Compassion challenges us to cry out with those in misery, to mourn with those who are lonely, to weep with those in tears. Compassion requires us to be weak with the weak, vulnerable with the vulnerable, and powerless with the powerless. Compassion means full immersion in the condition of being human. (4)

Compassion, however, does not end with the connection to the other or with the feelings this connection can ignite. Academics have argued that compassion also requires undertaking or having the desire to undertake actions to alleviate the other’s suffering (Maibom 125). Thus, compassion is a complex mix of thought, feeling, behaviour, and connection with the other.

Although scholars have given much attention to what compassion is, they have also addressed how compassion can be engaged, with key points of difference and overlap emerging in relation to representing human suffering, distress, and/or violence. Empathy has been consistently identified as a central element of engagement, often being

presented as a prerequisite for compassion (Maibom 125). Empathy allows for feeling with the other, a feeling that is central to compassion (Maibom 125). How does that feeling occur? Margreet van der Cingel's qualitative study of nurses and their older patients demonstrated that, in addition to listening to their patients, nurses often imagine themselves in the places of or life circumstances of those patients (681). Interestingly, this description has remarkable overlap with how actors describe their work. In fact, some nurses even compared their work to actors' own, a topic I address in the next subsection.

There are further overlaps that exist between acting and compassion, the most notable of which centres around narrative. Shaun Gallagher argued, in relation to empathy, "narrative seems necessary... [it gives] us access to contexts that are broader than our own" (370). He also offered that, "[u]nderstanding persons in the context of their situation – having a sense of what their story is – is essential to forming an empathic attitude toward them." (Gallagher 374) Thus, for many scholars and researchers, narrative is an essential component of empathy, which is an essential component of compassion (Gallagher 307; van der Cingel 681). Narrative being integral to empathy and compassion, however, raises an interesting question about actors' lived experiences: could working in narrative forms - including theatre, film, and television - and approaching characters and their journeys through this narrative lens create more powerful empathetic and/or compassionate relationships, contributing to the depth of connection between actors and their characters?

Participants in my study often spoke about the role of empathy in the relationships they built with their characters. Empathy, however, seemed to just be one component of

the larger encounter, which appeared to be based in compassion. As opposed to medical models, where others can be erased or pitied, compassion-based interactions allow for connections with others and their sufferings in ways that protect those others' dignity and independence (Schantz 53). In this way, space is created for both the self and others, while an environment of care and witnessing is fostered (Schantz 53). These descriptions of compassion-based interactions match my participants' reports about their relationships with their characters, including feeling that their characters both were and were not their selves and needing to engage characters with openness and acceptance rather than judgment or pity. Thus, a compassion-based model could provide a powerful lens through which to examine actors' lived experiences and work. In addition, such a model can allow space for participants' desires and/or intents to alleviate suffering in the world through their work.

*Exploring Actors' Intense Emotions and Lingerings through the Lens of
Compassion Studies*

Having considered compassion, I now turn to how the costs of working with narratives and/or images of human suffering, distress, and/or violence are approached in a compassion-based model and what this model can bring to my research. Within the compassion studies field, there are scholars who have explored the potential costs and rewards of encountering narratives and/or images of human suffering, distress, and/or violence in professions, including: nursing, counseling, and social work. These scholars have identified three key terms to describe their participants' experiences with costs and rewards related to working with narratives and/or images of human suffering, distress,

and/or violence. These terms are: *burnout*, *compassion fatigue*, and *compassion satisfaction*. *Burnout* is defined as “a state of physical, emotional and mental exhaustion caused by long-term involvement in situations that are emotionally demanding” (Maslach & Schaufeli 14). Scholars have argued that burnout is long-term and connected to both working conditions and material encountered in the workplace (Udipi et al. 461). Burnout generally culminates in feelings of being overworked and disliking one’s work (Udipi et al. 461).

By contrast, compassion fatigue and compassion satisfaction are more immediate (Udipi et al. 461). Initially, *compassion fatigue* was proposed as “a state where the compassionate energy that is expended... has surpassed... restorative processes, with recovery power being lost, [manifesting] with marked physical, social, emotional, spiritual, [and/or] intellectual changes” (Coetzee & Klopper 237). More recently, however, it has been identified as “grieving for the tragedies that occur in [other’s] lives” (Udipi et al. 461).

On the other hand, there is *compassion satisfaction*, a relatively new term coined in 2007 by Melissa Radey and Charles R. Figley. In their article, “The Social Psychology of Compassion”, Radey and Figley offered that compassion satisfaction is similar to compassion fatigue but encompasses the rewards individuals derive from their engagement with and care for those who are suffering. These rewards included experiencing “the joy of helping others” and deriving fulfillment from one’s work with narratives and/or images of human suffering, distress, and/or violence (Radey & Figley 208).

At first glance, the terminology I have introduced here may seem to simply mirror the ideas put forward by vicarious trauma researchers. In fact, while a compassion researcher in nursing put forward the initial definition of compassion fatigue, it was soon co-opted by Figley, a seminal secondary and vicarious trauma scholar. Beyond that, there are still academics, mostly outside compassion studies, who use the terms *compassion fatigue*, *secondary traumatic stress*, and *vicarious trauma* interchangeably. Scholars working within compassion studies, however, have largely distanced themselves from the language and concepts of trauma and vicarious trauma research. It is this scholarship I choose to align with in my use of the terms *compassion fatigue*, *compassion satisfaction*, and *burnout*.

Examining the concepts, several key differences between vicarious trauma and burnout, compassion fatigue, and compassion satisfaction emerge. First, the compassion-based model does not present burnout or compassion fatigue as pathologies or mental health concerns. Rather, costs and rewards are presented as natural responses to the challenges of working with narratives and/or images of human suffering, distress, and/or violence (Harr 72). Second, within compassion research, burnout, compassion fatigue, and compassion satisfaction are not intended to be labels or diagnoses placed onto individuals (Sabo 139). Instead, they are states intended for individuals to self-identify with, if and when desired. Similarly, while attention and care is included in the compassion-based model, there is no suggestion that it can or is intended to “cure” burnout or compassion fatigue (Sabo 139). Third, as can already be seen in the three terms outlined above, both costs and rewards are addressed in this model. As these key differences demonstrate, the compassion-based model is not simply a re-packaged

version of the vicarious trauma model. In fact, the compassion-based model addresses many of my participants' concerns with vicarious trauma and the medical model.

As with vicarious trauma research, there are resonances between compassion research and the second theme that was identified in my study. The hallmarks of compassion fatigue include, "reliving aspects of distressing events, avoidance of anything potentially related to distressing events, physical symptoms of heightened irritability, sleep disturbances, quick temper and angry outbursts" (Udipi et al. 462). These hallmarks line up with my participants' experiences, as outlined in chapter 4. Beyond this overlap, however, there is also a connection between the larger concepts of compassion fatigue and the notion of cost that participants in my study reported in relation to their work with narratives and/or images of human suffering, distress, and/or violence.

The idea of cost itself relates to Figley's argument that compassion fatigue addresses the natural consequences of encountering and/or wanting to help individuals who have suffered or are suffering (*Compassion Fatigue: Coping* 10). For compassion researchers, compassion fatigue is not framed as a diagnosable health issue. Rather, it is the price paid for encountering and caring about others' suffering (Harr 72). This is in line with the way my participants framed their experiences. Beyond that, Sharanya Udipi, Patricia Veach, Juihsien Kao, and Bonnie Leroy made a comparison between compassion fatigue and grieving (461), which mirrors my participants' own comparisons between grieving and certain intense emotions and lingerings they encountered while representing human suffering, distress, and/or violence. This is an important point of overlap as it shows that compassion researchers and participants in my study are in line in terms of

seeing dealing with costs as a process or journey that can be challenging and, potentially, life-changing.

The overlap, however, does not end there. Compassion studies and, especially, empathy studies offer up the idea that imagination or simulation may be a part of both caring for and with others, as well as the costs of that caring (van der Cingel 681; Gallagher 356). Some empathy studies scholars have promoted simulation theory, which is built on the idea that “in our attempt to understand others we employ our own minds as a model on which we simulate the other’s mind by creating ‘as if’ or pretend beliefs, desires, [and/or] intentional states” (Gallagher 356). While there has been extensive debate regarding how empathy and compassion emerge, simulation theory remains one of the leading understandings about the way empathy and, by extension, compassion function (Gallagher 355).

As was mentioned above, when speaking about the role of compassion and empathy in their work, nurses in van der Cingel’s study compared themselves to actors. In fact, one nurse even argued that:

They (actors) take some event from their own life, something they can connect to ... I believe it is the same with empathy, you use parts of your own stuff too ... actually ... it’s not possible to do otherwise. You cannot know from theory how painful it is if you don’t recognize some part of it. It doesn’t have to be the exact same experience, but you need to draw upon something. (van der Cingel 681)

The ideas put forward in this quote, and in simulation theory in general, offer a persuasive challenge to the argument that acting is fake or pretend and, therefore, cannot or should not tax those who undertake it.

If simulation theory is partially or fully accepted, acting could be seen not only as working with compassion and empathy, but also working with and exploring the underlying processes that allow for such compassion and empathy to take place. This, in combination with the level of engagement with self, character, and narrative required of actors, supports the notion that high degrees of empathy and compassion formed between actors and their characters, open the door to powerful costs and rewards when representing human suffering, distress, and/or violence. This backs up the idea that costs and rewards should not be used to analyze actors' mental health or skill, but viewed as natural consequences of working with narratives and/or images of human suffering, distress, and/or violence, as well as of employing compassion and/or empathy in this work.

My study does not just have powerful points of overlap with compassion fatigue, but also with compassion satisfaction. Vicarious trauma research downplays the rewards that can emerge from working with narratives and/or images of human suffering, distress, and/or violence. For participants in my study, however, rewards were an integral part of their lived experiences of representing human suffering, distress, and/or violence. In fact, most participants were only able and willing to continue representing human suffering, distress, and/or violence because of these rewards, which included the joy of giving voice to experiences, people, or issues that might not otherwise be noticed; encouraging audience members to think and feel; challenging inequities and injustices; and, hopefully, fostering positive personal and/or socio-political development. Many participants also reported believing that their work could and did make a difference in the world.

As with my research, studies addressing compassion satisfaction have identified that professionals who engage with narratives and/or images of human suffering, distress, and/or violence can find great pride and joy within their work. On top of that, Cynthia Harr and other compassion researchers have proposed that compassion satisfaction can help mitigate and protect against compassion fatigue (75). This proposal led Radey and Figley to argue that, instead of the focus being on how compassion fatigue can be avoided, “the emphasis should be on promoting satisfaction” as, when compassion satisfaction is nurtured, compassion fatigue generally decreases (Harr 75). This idea will be discussed further in my next section, in relation to attention and care.

Finally, burnout speaks to my participants’ comments about the role working conditions played in both how they felt about their careers and how resilient they were when representing human suffering, distress, and/or violence. Burnout offers acting theorist/practitioners a way to begin discussing and addressing the interwoven relationships between costs related to representing human suffering, distress, and/or violence and workplace stressors. Frequently, in their interviews, my participants spoke about the impact their work environments had on them when they were representing human suffering, distress, and/or violence, as well as associated issues such as audition nerves, career instability, and financial strain. In addition, participants consistently pointed out that these and other stressors make a significant difference in the costs and rewards they experienced in relation to their work. At the same time, a clear distinction was drawn between workplace stressors and stressors related to narratives and/or images of human suffering, distress, and/or violence. The compassion-based model’s categories of *burnout* and *compassion fatigue* offer a way of acknowledging the impact of

workplace and career stressors, while differentiating them from the stressors related to narratives and/or images of human suffering, distress, and/or violence.

Compassion research addressing burnout has identified workplace stressors that have a strong impact on compassion fatigue. These include: being in an unstable financial situation, feeling taken for granted, having a difficult relationship with a superior, encountering discrimination, and/or feeling unable to voice concerns (Bell et al. 464). All of these stressors were raised by one or more of the participants in my study. In each case, the stressor was described both as being challenging in itself and as adding to the number and intensity of the costs participants experienced when representing human suffering, distress, and/or violence. In addition, participants who encountered these stressors felt decreased levels of resilience and joy. As one participant explained,

I think of professional athletes and I think what it takes ... look at those guys and how much money they make ... how much resource they have to take care of themselves ... and find release and find relaxation ... [as an actor,] you don't have those opportunities so ... playing something really demanding just is that much more of an effect ... It's harder to ... bounce back every day ... (Interview 17)

This idea is supported by compassion research, which has demonstrated that burnout intensifies compassion fatigue and decreases resilience in professions outside the entertainment industry (Harr 74). The same studies also inversely linked burnout to compassion satisfaction and to the rewards professionals experience in relation to their work with narratives and/or images of human suffering, distress, and/or violence (Harr 75). These links support that it is important to consider workplace and industry stressors

when looking at the consequences of representing human suffering, distress, and/or violence. In addition, it is vital to explore whether there are workplace or industry stressors that can be reduced or areas where additional personal, structural, or interpersonal support could be of assistance. This is a topic I address further in my next section, in relation to attention and care.

Conclusion to Intense Emotions and Lingerings

In this section, I compared my second theme, addressing participants' intense emotions and lingerings, with relevant literature and research. To begin, I focused on vicarious trauma studies, considering how research in that field compared to my own. Following that, I explored ways that my study speaks to and challenges vicarious trauma studies and the medical model. I then introduced compassion studies and offered a compassion-based model as an alternative to the medical model. Finally, I looked at my study in light of compassion research. Having reflected on actors' intense emotions and lingerings in relation to relevant literature, I now continue on to the third and final theme that was identified in my study.

Forms of Attention and Care

Introduction to Forms of Attention and Care

My third and final theme is connected to the personal, structural, and interpersonal attention and care that was identified in relation to actors' lived experiences of representing human suffering, distress, and/or violence. This theme opens up two interesting avenues in literature, one theoretical and one practical. In this sub-section, I

deal with both these avenues. First, I explore the theoretical, considering my theme in relation to theories of ethics. Following that, I move into the practical, comparing my theme to vicarious trauma research and compassion research. Drawing on this literature, I analyze forms of attention and care already being used by actors, as well as those that could be engaged with in the future.

Ethics in Acting

In chapter 1, I raised the question of ethics and what responsibility— if any — entertainment professionals have to the actors they hire to perform roles that include representing human suffering, distress, and/or violence. At that point, I considered two key, interwoven ideas related to ethics and acting. The first was my theory that costs encountered over the course of a production might not be able to be accurately anticipated in advance, limiting actors' abilities to make informed choices about the consequences they would face when representing human suffering, distress, and/or violence. The second idea was that, in many non-arts fields, employers are seen to owe a duty of care to their employees and bear a certain degree of responsibility for any personal and interpersonal costs that arise for them while working with narratives and/or images of human suffering, distress, and/or violence.

Returning to the first idea, my research has demonstrated that actors, like non-arts professionals, are often unable to predict the costs they will encounter when working with narratives and/or images of human suffering, distress, and/or violence. Participants in my study consistently reported being surprised by the costs they encountered in relation to one or more of their roles. This was especially true in cases where the costs encountered

were powerful. There were also some situations where participants predicted that they would experience overwhelming costs, so turned down roles. While it is impossible to say whether these predictions were accurate, in some cases where participants expected roles to be extremely personally taxing but took them on, they moved through the production process with relative ease. I am not suggesting that actors' boundaries about what roles they will take on should be ignored or disrespected. I am simply arguing that the onus should not be put on actors to accurately anticipate costs and avoid work that could be extremely taxing.

Beyond the issue of being able to accurately predict costs in advance, actors may not have the financial or career stability to turn down roles or may find value in roles despite them being extremely taxing. Several participants in my study indicated that, with appropriate attention and care available to them, they found great rewards in their most taxing roles. Although the processes were difficult and, at times, painful, in hindsight, participants were generally glad they had taken on the roles. Certainly, there were roles where this was not the case, but these were in the minority. All participants, however, wished for greater acceptance and strong, available forms of attention and care. In addition, they wanted employers and directors to carry a sense of responsibility toward actors when asking them to perform roles that include representing human suffering, distress, and/or violence.

This leads to the second idea I raised in chapter 1. In numerous non-arts professions, employers building ethical, caring relationships with their employees is established and expected. In fact, ethical employer/employee relationships are seen as so important that a field of ethics has formed around the workplace and management

approaches within it. Workplace ethics focuses on the “practice of ethical attitudes and behaviors in the context of work” (Singh 56). Within this area of study, the concept of ethical leadership has also arisen, being declared the “single most important determinant of an organization’s climate” (Stringer 12). According to Michael Brown and his colleagues, ethical leadership is:

the demonstration of normatively appropriate conduct through personal actions and interpersonal relationships, and the promotion of such conduct to followers through two-way communication, reinforcement, and decision-making ... (120)

Research has demonstrated that workplaces can have a significant influence on employees, including their health and wellness. Workplace environments can alter the quantity and quality of work produced, as well as the number of hours employees are willing to put in (Karnes 194). Workplace environments also have a significant influence over how employees feel about their work and the amount of joy and/or stress they experience within it (Verschoor 21-22). Finally, employees’ levels of resilience and the trust they have in themselves, their co-workers, and their employers are tied into workplace environments (Harr 77).

In addition to workplaces, leaders, including employers and direct supervisors, have a significant impact on employees. Research has shown that leaders fundamentally shape what is considered “right” and “wrong” in workplaces (M. Brown et al. 606). Considering various non-arts professions, scholars have argued that leaders shape how employees working at the same level or lower understand and respond to their own and others’ behaviours and actions (M. Brown et al. 606). This shaping occurs both directly, from how leaders respond to employees’ comments and behaviours, and vicariously,

from watching responses to other employees' comments and behaviours (M. Brown et al. 606). Employees frequently take on the views and behaviours they learn are desirable in their workplaces, shifting their own understandings, approaches, notions of acceptable behaviours, and, as a result, personal care strategies (M. Brown et al. 606). Then, as employees move up into leadership positions, they shape others. This cycle demonstrates how attitudes and understandings of acceptable behaviour can be passed down through multiple generations of employees.

The research I laid out above made it clear how important workplace environments and leaders' ethical stances, views, and behaviors are to employees' health and wellness. Beyond that, the research supported my participants' comments about how workplaces and directors' approaches influence the costs and rewards actors experience when representing human suffering, distress, and/or violence. In tandem, my research and studies in relation to workplace ethics have suggested that employers, directors, and other superiors can influence how actors see the costs and rewards they encounter, how open they feel they can be about these costs and rewards, how they see attention and care, how likely they are to engage with forms of attention and care, how resilient they are, and even whether or not they see health and wellness as a priority.

The importance of workplace environments and leaders' approaches is clear if there is an assumed fundamental interest in employees and their health and wellness. There are individuals, however, who might not inherently have this interest. In chapters 1 and 2, I discussed notions of responsibility to the other based on shared humanity and implied societal contracts. Workplace ethicists have added another basis for responsibility to the other in professional environments. One such ethicist, Kavita Singh

identified that workplaces have expectations for their employees' behaviour (56). Singh stated that, "employees are [now] being judged not on the basis of their knowledge and competence alone but also by ways of maintaining relationship[s] with one another" (66). Since employers have expectations of employees' behaviour and relationships with others, including their employers and workplaces, a number of ethicists have argued that employees are owed some level of reciprocal responsibility from their employers (Ezigbo 236-237). This includes building accepting, open, ethical workplace environments (Iqbal et al. 84).

The challenge is in creating a space and approach that is ethical and responsible without tipping over and becoming paternalistic or prescriptive. Nadia Iqbal, Waheed Akbar Bhatti, and Arshad Zaheer offered that the best way to avoid paternalism is for workplaces to focus on "moral attitude" rather than "moral judgment" (84). As Iqbal, Bhatti, and Zaheer explained, *moral attitude* is "an ethic of care and focuses on ethics of 'being' instead of 'doing' ... [an] ethic of care focuses on love, care, compassion and sympathy" (84). In Iqbal, Bhatti, and Zaheer's approach and in other workplace ethicists' approaches, creating ethical professional environments and ethical leadership means focusing not just on the work being produced, but also the human beings producing it (84).

Attention and Care in Practice

While this topic would generally not be considered academic enough to be discussed in relation to relevant literature, participants in my study specifically requested more information about attention and care and felt such information would be of

assistances to actors, as well as other entertainment professionals, scholars, and members of the general public. In order to honour my participants' needs and in light of my work's position at the intersection of scholarship and practice, I feel that the practical areas of attention and care need to be given the same focus as I have given to theoretical concerns. Therefore, I now turn my attention to exploring the practicalities of personal, structural, and interpersonal forms of attention and care in light of literature and research in other fields.

Acknowledging Consequences

There is one step necessary to even engage with forms of attention and care. This step is often missed in research studies, although Harr noted it in her article "Promoting Workplace Health by Diminishing the Negative Impact of Compassion Fatigue and Increasing Compassion Satisfaction". The step I am referring to is acknowledgment that there are consequences to working with narratives and/or images of human suffering, distress, and/or violence. It is easy to overlook as professionals who participate in research studies addressing these consequences generally come in with this acknowledgment. It is an important step, however, as, without it, individuals may not engage with or actively pursue forms of attention and care.

Personal Forms of Attention and Care

My study and research in other fields have demonstrated the vital role personal forms of attention and care play in professionals' health and wellness when working with narratives and/or images of human suffering, distress, and/or violence. In fact, Debra

Neumann and Sarah Gamble argued, in relation to therapists, that “the importance of ... self-care can never be emphasized enough” (345). Personal attention and care, however, can be further broken down into physical, mental, and emotional forms.

Participants in my study emphasized the support they found in physical forms of attention and care, including physical activity. This matched up with research studies in other fields, which have consistently shown a strong connection between physical activity and reduced stress levels (Gillan et al. 55). Not only does physical activity lower stress levels and increase resilience in the short-term, it also protects against future stress (Gillan et al. 55). In fact, adults who engage in physical activity report lower levels of subjective stress in relation to both significant challenges and quotidian concerns than adults who do not engage in physical activity (Stults-Kolehmainen & Sinha 83). This research backs up my participants’ descriptions about the importance of physical activity in actors’ health and wellness.

Although physical activity was a powerful support for those who employed it, breathing techniques were the form of physical attention and care my participants spent the most time discussing. It was also a form that all participants identified as a central support both in relation to representing human suffering, distress, and/or violence and life in general. Why are breathing techniques such a significant form of support? Research in relation to stress and depression may offer some answers here.

This research has shown that, when under stress, individuals’ breathing changes, becoming faster and more shallow (Olpin & Hesson 17). In addition, there are other body/mind changes, including shifts in individuals’ autonomic nervous systems and heart rates (Olpin & Hesson 276). All these changes have been linked to anxiety and

depression (Olpin & Hesson 276). When breathing techniques are used, however, individuals can drop their breath back down to their diaphragms, signaling their body/minds to return to more stable states (Olpin & Hesson 276). This can have positive consequences for emotional stability, resilience levels, and overall health and wellness (Olpin & Hesson 276).

While breathing techniques were employed on their own, many participants in my study also used systems, such as meditation and yoga, where breathing techniques were one part of larger practices. In many cases, these practices were ancient systems. There is, however, a newer system that has been gaining momentum in other professions as a form of attention and care. This system, called *mindfulness meditation*, is specifically targeted to stress reduction and could be of assistance to actors who are representing human suffering, distress, and/or violence.

Mindfulness meditation, created by Jon Kabat-Zinn and based on Buddhist meditative practices, is “paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally” (Kabat-Zinn “What is Mindfulness?”). It focuses on supporting individuals’ abilities to engage fully in the present moment, as well as to strengthen their relationships with their selves and others (Kabat-Zinn “What is Mindfulness?”). To accomplish this, “self-observation, self-inquiry, and mindful action” are engaged (Kabat-Zinn “What is Mindfulness?”).

Mindfulness meditation is now being employed in numerous workplaces because of its ability to reduce stress, anxiety, depression, and pain levels, while increasing resilience and joy (Thompson et al. 61). Consistently, it is being identified as a powerful support system for professionals dealing with a variety of stressors (Thompson et al. 61).

Mindfulness meditation, while not specifically discussed by my participants, is consistent with techniques they have already employed. Thus, mindfulness meditation could be an option for actors seeking additional forms of personal attention and care, actors who have not found breathing techniques they connect with, and actors who are not receiving enough support from the larger systems they currently employ.

In addition to meditation, breathing techniques, and yoga, participants in my study drew support from physical and mental rest, when they could find it. This included taking physical downtime and getting enough sleep. In relation to their research into psychologists' self-care, Janet Coster and Milton Schwebel argued that rest and relaxation are central to health and wellbeing (11). Maria Giese and her associates explained that sleep is key as it lowers stress levels and increases resilience to stress (3-4). The challenge is that increased stress actually has a negative impact on sleep, often making it more difficult to maintain a full sleep cycle right when it is most important (Giese et al. 4). This is in line with my participants' experiences. They identified that it can be hard for actors to rest while representing human suffering, distress, and/or violence. Resting is made all the more difficult by the many demands actors face in relation to work, auditions for future roles, additional jobs, friends, significant others, children, and/or other family members. Financial limitations were significantly tied into the difficulties many participants experienced with carving out time for enough rest and/or sleep. I address these limitations further below, in relation to structural forms of attention and care.

While time could also be an issue, when able to engage with them, participants also found support in relaxing activities. As I explored in chapter 4, participants in my

study engaged in various forms of relaxation, including reading and cooking. Coster and Schwebel endorsed the support that can be found in avocations (11). As physical relaxation can lower stress and raise resilience, so too can mental relaxation (Cunningham 341). Mental relaxation can achieve this in two ways. First, it has the ability to take individuals' minds away from taxing material and/or situations (Cunningham 341). Second, it can provide time and space for minds and emotions to recharge and heal (Cunningham 341).

The challenge with mental relaxation for my participants was truly being able to separate from the work. Even when engaging in activities meant to be mentally relaxing, while engaged in shows that involved representing human suffering, distress, and/or violence, many participants had difficulties getting their minds to stop thinking about the shows and topics related to them. Like with rest, a cycle can be created where mental relaxation is the most elusive right when it could be the most helpful (Figley, *Compassion Fatigue: Coping* 186). This situation, however, is not unique to actors. In fact, researchers in other fields have proposed that individuals under stress consider employing techniques such as meditation or yoga to help create distance from stressors and build an inner peace before trying to engage in mentally relaxing activities (Figley, *Compassion Fatigue: Coping* 167; Skovholt & Trotter-Mathison 173).

One way my participants already created distance from stressful material was through humour. My participants spoke about the importance of both having a sense of humour about their work and physically laughing. Exploring research in other fields, it is clear that humour is a long-established support system, used to reduce stress and increase resilience. In fact, Harr showed that humour makes a significant difference in individuals'

abilities to cope with adversity (81). Even half an hour of engaging with some form of humour has an immediate impact on individuals, lowering their psychological and physiological stress levels (Rizzolo 102-103). In addition, laughter is a significant source of relaxation, reducing stress and anxiety (Rizzolo 102-103). These conclusions help explain the support my participants found in humour and laughter, as well as show how humour and laughter can be helpful means of stress reduction during times when relaxation is not possible or is elusive.

Emotional forms of personal attention and care can also assist with stress reduction. As was discussed in chapter 4, a common form of emotional support used by participants in my study was avoiding other emotionally challenging material while representing human suffering, distress, and/or violence. Participants who employed this form of support explained that they did so when they could not handle any more emotional material. In order to protect themselves, they would censor the material they engaged with. One vicarious trauma study noted a parallel situation occurring with therapists (Neumann & Gamble 346). Therapists in this study avoided similar material to my participants, including: emotionally demanding television shows, heavy reading, and the news (Neumann & Gamble 346). Both these therapists and my participants avoided emotional material beyond just the topics they were dealing with in the workplace. In the case of my study, the material avoided was not always viewed as emotionally challenging by participants' loved ones. As with other areas of self-care, however, participants' responses to material and how they handled those responses were extremely personal.

Though they did not recommend it in the long-term, Neumann and Gamble argued that, in the short-term, this limiting of emotionally demanding material can be

helpful (346). Udipi, Veach, Kao, and Leroy expanded on this, explaining that working with narratives and/or images of human suffering, distress, and/or violence can leave people more emotionally raw and less resilient than they generally are (470). Engaging with other taxing material while in this state can contribute to powerful consequences, including feeling overwhelmed (Cunningham 341). Limiting taxing material, therefore, can be seen as a way of respecting one's current needs and boundaries.

In some cases, participants also set very specific limits on the material they engaged with immediately after closing their shows, including anything to do with the shows and the topics explored within them. Vicarious trauma research and compassion research have shown that non-arts professionals engage in similar behaviours, which vicarious trauma scholars have positioned as forms of avoidance (Figley, *Treating Compassion Fatigue* 203). As with avoiding taxing material while working with narratives and/or images of human suffering, distress, and/or violence, avoiding materials related to human suffering, distress, and/or violence after completing a contract can provide separation, rest, and even healing (Figley, *Treating Compassion Fatigue* 203). Participants in my study, however, noted that long-term avoidance and/or making major life changes to extend avoidance can be personally and interpersonally harmful. Researchers in other fields similarly identified that there are points where avoidance can shift from supportive to destructive and debilitating (Figley, *Treating Compassion Fatigue* 4).

The difficulty is that relationships can develop between lingerings and forms of attention and care, causing them to oppose or align with one another. When lingerings and care are in opposition, the lingerings individuals experience directly contradict with

situations, thoughts, feelings, and/or behaviours that have been identified as forms of attention and care. For instance, although my participants and non-arts professionals consistently identified physical activity as helpful when working with narratives and/or images of human suffering, distress, and/or violence, many participants also reported that the greater the costs of their work, the more tired they became, and the more difficult it generally was to engage in physical activity. Therefore, the costs individuals experience can work directly against, and may even undermine, engagement with personal and interpersonal forms of attention and care. In fact, in several cases, participants in my study actually employed fewer and fewer forms of attention and care when the costs of their work increased. This was especially common with participants who were early in their careers.

At the other extreme, there were times where my participants thought they were engaging in forms of care, only to later feel that they had actually been doing the opposite or that they had slipped into doing the opposite. One example of this was participants who decreased their social interactions, believing this would allow them to rest and relax while dealing with the costs of particularly taxing shows. Looking back, however, these participants felt they had used rest as an excuse to isolate themselves. Ultimately, they thought this isolation had taken them away from the support of family and friends, as well as intensified the sadness, anxiety, exhaustion, and pain they experienced. There were also times where what began as forms of care transformed over time, becoming sources of distress for participants.

During the interviews I conducted, there were two factors that often appeared in situations where lingerings and forms of attention and care aligned or opposed one

another. The first factor was that working with narratives and/or images of human suffering, distress, and/or violence left a number of participants in stressful, emotional states where they were not thinking at their clearest or behaving in ways that they felt reflected their quotidian selves. This is in line with one of the central paradoxes identified in compassion research. This paradox centres around the fact that navigating the costs of working with narratives and/or images of human suffering, distress, and/or violence generally requires high levels of self-awareness, strong decision making, and extensive engagement with various forms of attention and care, yet the costs themselves often undermine self-awareness, decision making, and engagement with attention and care. In fact, the costs of working with narratives and/or images of human suffering, distress, and/or violence can leave individuals feeling disconnected from themselves; reduce their decision making skills; and limit the time, energy, and drive they have to engage with forms of attention and care (Coetzee & Klopper 239). Once again, when individuals engaging with narratives and/or images of human suffering, distress, and/or violence are in the greatest need, what they most require becomes elusive.

The second factor was that almost every form of attention and care has the potential to become harmful depending on why and how often it is engaged in. This is not an unusual circumstance, often appearing in different iterations in quotidian life. An easy, quotidian example relates to food. While eating is a necessity of life, both overeating and undereating can lead to unhealthy and, at times, even life-threatening circumstances. Eating for reasons such as repressing emotions, pain, or grief can also be dangerous. Similar to eating, exercise, rest, and even love have the potential to become unhealthy, depending on how and why they are undertaken. Given this, it should come as no surprise

that there were situations where previously supportive forms of attention and care no longer assisted or even became distressing to my participants. The two factors I have addressed and the alignments or oppositions they are often tied to further support that building attention and care systems is a constant journey that cannot be prescribed.

Although researchers have identified supports that professionals commonly find helpful and have examined the science behind these supports, it is impossible to factor in all the unique situations that govern how and why professionals engage with the forms of attention and care that they do. Therefore, while researchers have established a landscape of available attention and care options, no one can provide a simple recipe for support systems. In spite of this, however, prescriptive models have often been implied or outright endorsed by theatre theorist/practitioners, most of whom have based their models solely off research from other fields that was conducted with non-arts professionals.

While attention and care strategies cannot be prescribed, there are some behaviours that both I and researchers in other fields have found lower resilience and/or contribute to feelings of distress. Some of these behaviours include: drinking/drug use, trying to push through and “get on with the work”, tying one’s selfhood to work, and constantly thinking about or doing work (Mathieu 51). There is a thread that runs through all of these behaviours. Each one includes an avoidance or denial of costs.

Participants in my study identified that some actors use drug and/or alcohol to avoid distress related to the costs of their work. These reports align with research in other fields, which has shown that drugs and alcohol are used by some professionals to numb the costs that emerge when working with narratives and/or images of human suffering, distress, and/or violence (Mathieu 51). In my study, participants reported there being

dangerous times when actors are more likely to use drugs or alcohol. One such time, for example, is after performances, as a way to wind down. After performances, actors generally arrive home late. The work can still be bouncing around in their heads and their loved ones are usually already asleep. Participants reported that some actors then turn to drugs and alcohol to numb themselves to their situations or to sleep. There are also actors who use drugs and/or alcohol to numb themselves to the costs of their work at other times, to stop thinking about their roles and the material related to them, and/or to relax.

A number of participants cited how dangerous using drugs and/or alcohol for these purposes can be. Looking at compassion research, increased drug and alcohol use have been connected to higher levels of compassion fatigue and burnout, as well as lowered resilience (Mathieu 51). In addition, using drugs and/or alcohol as a way of dealing with the costs of working with narratives and/or images of human suffering, distress, and/or violence has been connected to an increased risk of drug and alcohol abuse, as well as the associated health risks (Figley, *Treating Compassion Fatigue* 18). Beyond these concerns, drug and/or alcohol use as a means of coping with costs related to working with narratives and/or images of human suffering, distress, and/or violence can pull professionals away from engaging with forms of attention and care, further undermining their health and wellness (Mathieu 51).

Muscling through costs and “getting on with the work” can also undermine actors’ health and wellness. After all, as I established in chapter 4, my participants were unable to ignore or push through costs related to representing human suffering, distress, and/or violence. In fact, this strategy only increased and extended the costs until they could no longer be ignored. Researchers in other fields have similarly concluded that

muscling through increases distress, as well as leaves professionals less likely to speak up about costs they do encounter or to engage with support systems (Mathieu 51). Then, when muscling through does not succeed, professionals can experience guilt and shame on top of the costs they are already encountering (Mathieu 51). In spite of this, many participants in my study felt the acting industry and North American society generally expect actors to be able to keep pushing through, not openly identifying or addressing the consequences of representing human suffering, distress, and/or violence. I further discuss these expectations below, in my Structural Attention and Care sub-section.

The final two behaviours, tying one's sense of self to work or focusing solely on the work, can direct actors' focus away from forms of attention and care and become a means of avoidance. Researchers have argued that when professionals do not take time away from thinking about or doing work and/or tie their identity to careers that involve working with narratives and/or images of human suffering, distress, and/or violence, they can lose the things and people that allow them to ground themselves when facing taxing material (Trippany et al. 33). In addition, as both this research and my study have shown, these professionals may decrease their engagement with the world around them, potentially reducing their joy in life, their senses of meaning in their work, and their resilience (Harr 75).

My study and research conducted with non-arts professionals have demonstrated that, in order to continue working with narratives and/or images of human suffering, distress, and/or violence, individuals need to take time away from their work. This time includes taking physical, mental, and emotional time breaks. Distance can assist professionals in maintaining resilience and joy in their work (Figley, "Compassion

Fatigue: Psychotherapists” 1438). This distance is especially important in times of stress and when challenges arise in the workplace (Figley, “Compassion Fatigue: Psychotherapists” 1438).

Not working and not thinking about work, however, could be difficult for my participants, particularly when they did not feel their performances were where they needed to be. Certainly, there were situations where participants needed to engage in additional tasks, such as character research or text analysis, outside the workplace, making distance even more difficult to find. If participants did not also devote time and energy to other areas of their lives and maintain a sense of self outside their employment, however, the costs they encountered could become increasingly taxing and their resilience could decrease. This experience lines up with reports in vicarious trauma research (Cunningham 341) and compassion research (Coster & Schwebel 7). In addition, researchers in these fields have suggested that distance has an impact on how much professionals enjoy their work, as well as on their ability to fully and openly engage with their compassion and/or empathy (Harr 83).

Although finding joy and value in one’s work could be dismissed as a privilege, nice to have but not required, this is not the case for professionals working with narratives and/or images of human suffering, distress, and/or violence. As has been mentioned in previous sections and chapters, joy is an important form of support and an integral part of professionals’ health and wellness when working with narratives and/or images of human suffering, distress, and/or violence. This was resoundingly supported by my study, in which participants unanimously spoke about how seeing value and finding joy in their work helped them deal with the intense emotions and lingerings they

encountered. Similarly, as I addressed earlier in this chapter, a number of research studies have shown that compassion satisfaction is central to increasing resilience and decreasing compassion fatigue and burnout (Harr 75).

Knowing the importance of finding joy and value in their work, are there ways actors can cultivate these feelings? This question is already being considered in relation to non-arts professionals in compassion research and vicarious trauma research, where leading scholars have offered that “the emphasis should be on promoting satisfaction (or positive affect/attitude) rather than avoiding compassion fatigue (or negative affect/attitude) in order to protect caregivers from the negative impact of working with the suffering” (Harr 75). Interestingly, however, in relation to both senses of joy and value, cyclical relationships appear. As with my study, researchers in other fields have found that employees’ beliefs in their abilities to create positive change are key contributors to the love they have for their work and the joy they find within it (Harr 82). At the same time, however, employees with higher levels of joy and/or compassion satisfaction are more likely to continue believing in the value of their work (Harr 82). This may indicate that a loop of positivity can be created once employees have even minimal levels of joy and/or belief in their abilities to influence change.

Those who do not already have joy or belief in the value of their work can still build it from seeing the impact of their efforts, as well as from positive feedback from others (Harr 82). In some careers, it is easy to locate the impact of the work. For example, therapists may see tangible changes in their patients or receive feedback through surveys. For actors, however, change and feedback may not be as readily identifiable or available. This could explain why, when speaking about the value of their work, many of the

participants in my study referenced shows based on true stories (especially those where one or more of the people involved in the situation came to see performances) and/or specific interactions with audience members who were deeply touched by shows. Each of these situations allowed participants to see tangible impacts of their work. This is not the norm, however. The power of art often emerges in abstract, long-term ways. This can be challenging for actors since, if their joy and sense of value in their work are shaken, there is not always clear feedback to help re-build them. The structural and interpersonal sides of rebuilding are considered later in this chapter. On a personal level, though, it seems important that actors representing human suffering, distress, and/or violence identify what they see as the value of and foster their joy in their work

While seeing the value of one's work is crucial, Harr also proposed that individuals vicariously encountering human suffering, distress, and/or violence need to have reasonable expectations about the impact they can create (82). She felt the best stance is one of realistic idealism, as it allows employees to retain their beliefs in their abilities to help others while also not expecting to change the world single-handedly, overnight (Harr 82). Looking at my participants' comments, it is clear that it is important to be realistic about how challenging change can be and how long it can take. Participants who held unreasonable expectations about how quickly and easily change could be created at times found their joy and the value they placed in their work confronted when change occurred on a smaller scale or longer timeline than they had anticipated. The key was balance. For many of my participants, that balance came from being idealistic about the world that could be created and the power of individuals to create that world, while

still being realistic about the timeline for change and what that change might look like, especially at the start.

Harr argued that there is another key factor related to building joy within work that involves confronting human suffering, distress, and/or violence. This factor is engaging with support systems. Harr explained that,

For ... workers who value service and self-sacrifice, it is often difficult to face the reality that they need to give attention to their own well-being. There has to be ongoing “input” of the positive into their lives that will sustain the “output” necessary at their stressful job. Many tend to live their lives running from task to task, exhausted and overwhelmed. Practitioners must develop coping strategies and incorporate them into their daily lives. (83)

This was in line with my participants’ comments, which indicated that they took more pleasure and pride in their work when they were able to take time for themselves and to engage with support systems. Taking this time could be difficult, though, due to the financial and scheduling pressures of being an actor. These pressures will be addressed in the Structural Forms of Attention and Care sub-section, below.

Even when individuals are able to engage with attention and care, not all support systems foster joy and a sense of value related to working with narratives and/or images of human suffering, distress, and/or violence. Thus, it is important that information about what various forms of attention and care offer to those who engage with them. For example, looking across a number of studies, Suzanne Slocum-Gori and her colleagues discovered that meditation, mindfulness, and creative writing are some of the most

influential forms of personal attention and care in terms of increasing compassion satisfaction amongst non-arts professionals (177).

In addition to the forms of attention and care already addressed, many participants in my study identified a final factor that contributed to their joy and sense of value in their work. This final factor was the personal growth that occurred while representing human suffering, distress, and/or violence. As with other rewarding elements of working with narratives and/or images of human suffering, distress, and/or violence, discussions of personal growth are underrepresented in relevant literature. In my study, however, participants reported that their work made them more empathetic, compassionate, understanding, mature, and/or responsible.

Several participants directly stated that representing human suffering, distress, and/or violence had made them “better people”. Within vicarious trauma research, non-arts professionals have described similar experiences. For example, Sally Hunter explained that:

practitioners have argued that therapists can be influenced by their clients in positive ways and can experience personal growth as a result of their work ... Calhoun and Tedeschi ... defined posttraumatic growth as a threefold process of growth in relation to: sense of self; philosophy of life; and interpersonal relationships. The term “vicarious resilience” has also been used to describe how trauma work can sustain and empower therapists ... it may be specific to trauma work and represents a transformation in the therapist’s inner world, as a result of working with traumatic client material, that “counteracts the normally occurring fatiguing processes. (180-181)

By going through growth while representing human suffering, distress, and/or violence and by reflecting on that growth, many of my participants were able to derive personal satisfaction and value from their work, on top of any interpersonal and social joy and value.

Structural Forms of Attention and Care

When support systems have been discussed in some theatre scholarship, the focus has generally remained on the personal and interpersonal. Structural forms of attention and care have largely been overlooked. I believe, however, that structural forms of attention and care need to be specifically addressed in order to fully explore actors' overall health and wellness, as well as maintain ethical workplaces. The importance of structural forms of attention and care has been clearly demonstrated in both compassion studies and vicarious trauma studies. Research in both fields has suggested that structural choices, such as reducing the amount of work that includes exposure to human suffering, distress, and/or violence that an employee is asked to take on, have a greater ability to lower compassion fatigue, lower burnout, and increase compassion satisfaction than any form of personal or interpersonal support (Brady et al. 390-391; Harr 76, 78-79). While this research cannot simply be applied to actors, it does indicate a need to explore the structures of actors' workplaces to see if there is room for improvement.

This exploration was supported by participants in my study, who frequently commented on structural concerns they had about the entertainment industry and individual workplaces. As with personal and interpersonal forms of attention and care, participants gave extensive reports about their experiences with structural supports.

Unlike the other two areas, however, when speaking about structural forms of attention and care, participants frequently did not feel they had found the assistance they needed. Thus, their statements were mostly focused on the changes they wanted to see and that they felt would be of greatest assistance to their health and wellness.

In this sub-section, I report on the forms of structural attention and care participants already felt supported by, as well as discuss the forms participants believed would be of further assistance. This is not to argue that the concerns and ideas put forward in this sub-section are a complete list, are endorsed by all actors, or should all necessarily be implemented. I simply believe that in order to build and maintain an ethical entertainment industry that gives the greatest level of attention and care to those working within it, actors' voices, concerns, and ideas on this topic need to be heard and a dialogue needs to begin that includes both actors and their employers.

A major concern and reality for many actors is living with financial instability. Most participants in my study discussed the financial pressures of being actors and the stress that pressure brings. This stress centred on participants feeling a lack of security with their financial situations. That lack of security kept these participants always worrying about where their next job would come from and often living on minimal incomes, even when working. For some participants, having limited resources left them unable to afford access to many significant means of relaxation. Feeling unable to afford the relaxation they needed or to find the time to engage with it increased the toll the costs related to representing human suffering, distress, and/or violence took on participants and lowered their levels of resilience.

Many participants also encountered scheduling pressures, which, at times, were linked to financial concerns. Even while working on fully-funded shows produced by recognized Canadian theatres, participants were generally not making enough money to be able to afford being out of work even for a short time after closing. Therefore, while working on one production, participants were frequently auditioning for their next theatre shows; auditioning for commercial, television, and film roles; filming commercial, television, and film roles; and sometimes even rehearsing other theatre shows. Most participants also maintained “joe-jobs” (jobs outside acting) to supplement their incomes and to keep them financially afloat if they did not book acting work for an extended period of time. Some of these jobs remained in the entertainment realm, with participants coaching other actors or teaching drama to children, while others were completely outside the performing arts. Generally, jobs in this second category, including positions like serving or bartending, were chosen for their flexible schedules. This flexible scheduling was essential for many participants as they did not have the financial stability to afford to lose their joe-jobs when they booked acting work. Switching between all their career, work, and personal responsibilities, however, brought participants a great deal of stress. This left many tired and feeling unable to take the downtime they needed to engage with various forms of attention and care, as well as deal with the costs of their work.

Discoveries made in studies conducted with non-arts professionals have generally been in line with my participants’ experiences. Vicarious trauma research has indicated that, when basic work needs, such as adequate financial compensation, are not met, non-arts professionals can become more responsive to narratives and/or imagery that include

human suffering, distress, and/or violence, encountering more and increasingly powerful costs (Neumann & Gamble 345). Similarly, research within compassion studies has found that, when financial hardship increases, stress levels increase, while resilience and engagement with support systems decrease (Bell et al. 464). When professionals work long hours and/or have unstable schedules, they also become more likely to experience higher levels of stress and lowered resilience (Harr 78). For these and other reasons, financial hardship and scheduling concerns can significantly increase workers' likelihood of experiencing compassion fatigue and/or burnout (Bell et al. 464; Harr 78). This research is vital to consider, especially as scheduling and finances were two of the greatest sources of stress for participants in my study.

Although it is common knowledge in the entertainment industry that actors often face financial instability; low yearly incomes; and stress related to these two circumstances, the situation remains largely unchanged. Often, only about half the actors in ACTRA report any performance income in a single year ("Artists' earnings"). Even those who are working earn well below a living wage ("Artists' earnings"). In fact, in 2007 and 2008, ACTRA members earned an average of \$6,127, while Equity members earned an average of \$12,226 ("Artists' earnings"). At the same time, there is a lack of arts funding and investment in Canada, always leaving theatres struggling to produce shows on minimal budgets (McCaughey).

Ideally, the solution would be for funding in the arts to boom and a plethora of well-paying contracts to open up. This is not the current situation, however, and cannot be relied upon to develop in the near future. Thus, while there is no current easy fix to the financial pressures actors face, the lack of funding that exists for the arts, or the

challenging schedules actors generally maintain, there are other options, like offering additional forms of attention and care to actors facing financial hardship and/or taxing schedules, to help support actors as they cope with the added pressures of industry stressors. To identify if there are options worth pursuing, it is important for theatre companies, producers, unions, the government, and actors to engage in a dialogue to discover whether the supports Canadian Actors' Equity Association and ACTRA have already put in place (ie. an emergency fund, tax workshops, child care, and tiered health benefits) are providing sufficient financial and/or schedule related assistance, as well as what, if any, additional supports would be desired and could be implemented.

For this discussion to occur, however, another key structural concern would need to be addressed. This concern is the entertainment industry's systemic judgment of actors who speak up about the consequences of representing human suffering, distress, and/or violence. One of the forms of attention and care most participants in my study sought was industry-wide open communication about and acceptance of the consequences of representing human suffering, distress, and/or violence. Essentially, participants wanted to be able to discuss the costs and rewards of representing human suffering, distress, and/or violence without fear of career repercussions, judgment, or stigma. They sought to have their experiences and selves accepted, and to be able to seek support in their work environments, if desired. It was extremely rare, however, for participants to feel they could even mention the idea of costs to superiors or find support in the workplace, let alone in the industry as a whole.

Vicarious trauma research has suggested that, in situations like this, feelings of "professional isolation" can arise (McCann & Pearlman 145). Professional isolation

occurs when employees feel unable to speak to their peers and superiors about the emotional challenges that can arise in relation to working with narratives and/or images of human suffering, distress, and/or violence (McCann & Pearlman 145). This then leaves employees on their own in dealing with any costs that emerge (McCann & Pearlman 145). While my participants reported being able to speak openly with specific individuals or in specific situations, these were the exceptions. Generally unable to discuss the consequences of their work, my participants overwhelmingly reported feelings of isolation and judgment when encountering costs related to representing human suffering, distress, and/or violence. According to McCann and Pearlman, professional isolation can increase the stress employees feel, can push employees away from seeking out support systems of any kind, and can ultimately increase the number and intensity of the costs employees encounter (145). Certainly, there are differences between McCann and Pearlman's research and actors' experiences, but there are also enough similarities to raise concerns about the impact of isolation and judgment on actors' health and wellness.

The question that remains, however, is: "What can be done about actors' feelings of isolation and judgment?" Erving Goffman argued that, in order for stigma to occur, individuals need to be positioned as being less than (3). In the case of actors, those who face costs related to representing human suffering, distress, and/or violence are positioned as less than trained, less than stable, less than healthy, and less than normal. Since stigma requires seeing individuals as less than, normalizing behavior and repositioning previously stigmatized individuals as complete beings would seem to be a way of breaking it. In fact, in non-arts fields, researchers have identified normalizing employees' experiences of working with narratives and/or images of human suffering,

distress, and/or violence as the most effective way of decreasing stigma and judgment (Brady, et al. 390).

Normalizing behaviour, however, can be complicated. Since many participants in my study found it difficult and potentially damaging to their careers to speak up about costs related to representing human suffering, distress, and/or violence, they often kept quiet or only spoke to individuals they were close to or in settings where it was clear that judgment would not take place. When most actors are not able or willing to speak up, though, the few who do can appear to have abnormal experiences. This can lead to them being stigmatized and feeling more isolated. Thus, a cycle can be created where actors are too uncomfortable or fearful to speak up about experiencing costs related to their work; with no one speaking up, the lack of voices is used as “proof” that experiencing costs is unusual or shameful; if anyone does speak up about costs, those in power stigmatize or judge them; and a new set of actors, seeing colleagues stigmatized, are left uncomfortable or fearful about speaking up. Cycles like this one allow the consequences of representing human suffering, distress, and/or violence to remain an open secret, passed down through generations of actors. To break this cycle, there have to be industry-wide and societal shifts in attitudes toward actors, allowing them to safely speak about their experiences.

Many scholars have offered theories about how to shift attitudes and challenge stigma, as well as better support employees. While these suggestions have been numerous, research studies, including my own, have revealed three main structural forms of attention and care that workers engaged in various fields would like to see implemented. The first form is official peer and workplace support. One of the support

systems in this form is formal discussion groups. These groups are different from the informal discussions that already occur between actors. Formal discussion groups are organized by employers to ensure that, if employees are looking for a place to speak about their lived experiences of working with narratives and/or images of human suffering, distress, and/or violence, a location is guaranteed to be available (Clark & Gioro 86-87). Vicarious trauma researchers have argued that providing spaces for workers to speak openly and find peer support contributes to building and maintaining “emotionally supportive, psychically safe, constantly respectful work environment[s]” (Brady, et al. 390). These environments are important contributors to employees’ long-term health and wellness when engaging with narratives and/or images of human suffering, distress, and/or violence (Brady, et al. 390). While several participants in my study cited wanting this type of support to be available in actors’ workplaces, they emphasized that no one should be forced to participate.

When looking at supports that can assist employees in their workplaces, as I previously discussed, Clark and Gioro proposed the acronym ACT, which stands for *acknowledge, connect, and talk* (86). *Acknowledge* includes acknowledging that there are consequences of working with narratives and/or images of human suffering, distress, and/or violence (Clark & Gioro 86). Workplace supports can help with this acknowledgment. On a broad level, having official forms of attention and care sends a powerful message that health and wellness are priorities in the workplace. This is important as research has demonstrated that employers’ attitudes and approaches influence employees’ own, both to their work and their health and wellness (Harr 76-79, 80-81). Thus, workplaces that demonstrate a commitment to health and wellness have the

ability to foster similar attitudes in their employees. These attitudes can then influence employees' engagement with forms of attention and care, as well as with their co-workers' health and wellness (Harr 74 79, 80-81). In addition, for employers, maintaining an ethics of care – which “focuses on [approaching employees with] love, care, compassion and sympathy” (Iqbal et al. 84) - has been shown to enhance employees' work, as well as increase their creativity and commitment to their jobs (Karnes 194).

One of the blocks to establishing supportive work environments in the entertainment field is the industry's concern that actors will abuse the openness, become overly demanding, or turn work into therapy sessions. In fact, acting and theatre scholars have made points of stating that actors must be careful not to turn their work into personal therapy (Salverson 186). While it is true that acting cannot support being turned into therapy, should we really fear that professional actors will not understand the difference between their workspaces and therapeutic settings or will try to use their work as a replacement for therapy? What guides the belief that open dialogue and forms of attention and care in the workplace mean providing employees with absolute power? Looking at other professions - for example, therapists - it is clear that support systems can and have been put into place without work environments collapsing or employees abusing them.

Katherine M. Boydell, Carmela Solimine, and Siona Jackson demonstrated that it is also possible to have an open, ethical, and functional arts workplace with professional dancers (203-209). Over the course of their research-based dance project, Boydell and her colleagues acknowledged two potential consequences of their work, which included

having dancers represent psychosis (205). Beyond that acknowledgement, Boydell and her colleagues also provided education and several structural support systems to the dancers they were working with (205-207). While this work was done in the context of a research-based project, which had a longer timeline than most professional projects (Boydell et al. 2004), the fact that forms of structural forms of attention and care were provided to the dancers without them “abusing the system” or turning the workplace into a therapy space indicates that it should certainly be possible for actors’ workplaces to provide support systems for those who wish to engage with them without professional boundaries crumbling.

There may be actors who will make unprofessional demands or not approach their work in a professional manner. There may be actors who, without realizing it, will cross some professional boundaries. There may even be times when employers will feel the need to step in to encourage or reinforce professional boundaries. All of these situations, however, occur in a range of professions. It is paternalistic to assume that these situations are the norm for actors, that they are simply waiting for chances to compromise professional boundaries, and/or that they need to be protected from themselves. Ultimately, I believe all of the concerns listed revolve around the central idea of trust.

The fact that there is so much concern in the entertainment industry about actors not treating their work, workplaces, and/or opportunities for support appropriately seems to point to a lack of trust in actors’ professionalism, as well as a fear of their emotions. It is only by giving trust, however, that employers can build and maintain workplaces where actors are respected as mature, empowered professionals. To not treat actors in this way, to position them as needing to be protected from themselves or saved by others,

lowers their status to that of children and is not an ethical way to approach adult professionals in their workplaces. If professional actors are trusted, however, it should be possible for employers to establish and actors to respect appropriate boundaries that allow for openness, connection, and support without undermining the work or allowing it to slip into therapy.

As important as acknowledging and accepting the costs of working with narratives and/or images of human suffering, distress, and/or violence is, it is equally important to acknowledge and accept the rewards. Like health and wellness, employers' attitudes toward finding joy when working with narratives and/or images of human suffering, distress, and/or violence influence employees' attitudes (Harr 79). When workplaces and training systems endorse the importance of finding joy and value in the work, it encourages individuals to engage with these two elements without guilt or fear of being stigmatized for finding rewards while working with narratives and/or images of human suffering, distress, and/or violence (Harr 78-79). Certainly, many participants in my study sought such endorsement as they felt that the rewards they had encountered while representing human suffering, distress, and/or violence were misunderstood, leading to judgment and stigma. Having more open, supportive attitudes in the entertainment industry, in actor training, and, especially, in society could assist actors in finding and accepting rewards related to representing human suffering, distress, and/or violence without encountering judgment or stigma.

Open, supportive attitudes are equally central to the second component of Clark and Gioro's ACT strategy: *connection*. Connection was also important to my participants. According to vicarious trauma scholars, feelings of interdependence and connection are

central to working through the costs of engaging with narratives and/or images of human suffering, distress, and/or violence (Figley, *Compassion Fatigue: Coping* 109). Figley argued that there are five ways social supports can provide assistance. These ways are: “encouragement, advice, emotional aid, tangible aid, and companionship” (Figley, *Compassion Fatigue: Coping* 109). These ways of providing care are in line with my participants’ reports about what they gained from informal peer support.

Looking to specific structural supports that can be implemented in the workplace, discussion groups can meet Clark and Gioro’s final ACT element of *talk* and can assist with building connections between employers and employees, as well as amongst employees (Harr 79-80). Discussion groups can also send out the message that the workplaces that offer them encourage social support, communication, and vulnerability, rather than penalizing employees for experiencing costs or seeking forms of attention and care (Harr 79-80). Thus, through their immediate impacts and workplace messages, creating formal but non-mandatory discussion groups can help combat professional isolation and increase employees’ resilience (Clark & Gioro 86-87).

Beyond Clark and Gioro’s ACT strategy, vicarious trauma scholars and compassion researchers have both highlighted the importance of education for professionals who work with narratives and/or images of human suffering, distress, and/or violence. Similarly, my participants demonstrated the central role that education and training play in professional actors’ career-long health and wellness strategies. There are two main areas of education my participants and scholars in other fields focused on. The first area is post-secondary education, which, for actors, can include university

degree programs, college diploma programs, and conservatory programs. The second area is professional development and continued training.

One major component of training and education is the content that is taught. Specifically considering post-secondary acting programs, participants in my study who had engaged in such programs argued that education has had a significant impact on their approaches to and strategies for maintaining health and wellness while representing human suffering, distress, and/or violence. Given this, participants suggested that instructors have a unique opportunity to educate future professional actors about the potential challenges and rewards of representing human suffering, distress, and/or violence.

Researchers working in non-arts fields have reached a similar conclusion. For example, a study conducted with therapists found that one of the most significant supports was making individuals aware of the potential costs of working with human suffering, distress, and/or violence, as well as support systems and strategies, during post-secondary training (Brady, et al. 390). Therapists who had been given this information during their post-secondary training felt they were better prepared when entering their industries, were more accepting of costs faced by both themselves and others, and were more active in building and engaging with forms of attention and care (Brady, et al. 390). In addition, therapists who had been exposed to information about forms of attention and care during post-secondary training engaged with more effective support systems earlier in their careers, avoiding some of the trial and error process most professionals went through while developing and implementing their attention and care strategies (Brady, et al. 390).

In addition to providing information, post-secondary instructors can also impart guidance regarding attitudes to working with narratives and/or images of human suffering, distress, and/or violence; the consequences of such work, and forms of attention and care (Harr 74-75). Instructors also have a chance to shape students' views toward their work, costs and rewards related to that work, health and wellness, and forms of attention and care (Harr 74-75). These views can then be carried over to professional environments as students graduate and move into their workplaces (Harr 74-75). An example of this was raised by several participants in my study. As students in post-secondary training programs, these participants had encountered instructors who viewed performance venues as sacred spaces, separate from the quotidian realm. These instructors influenced my participants' views such that, by their graduations, these participants also positioned performance venues as sacred spaces. This idea became a support strategy for them over the course of their professional careers, allowing them to create some distance from their work when representing human suffering, distress, and/or violence.

Instructors' views in relation to the consequences of working with narratives and/or images of human suffering, distress, and/or violence can be especially important. Scholars working in various non-arts fields have agreed that instructors can shape how students understand and approach the costs and rewards that can emerge while working with narratives and/or images of human suffering, distress, and/or violence (Brady et al. 390; Harr 77). By providing class time to speak about costs, rewards, and forms of attention and care, as well as by modeling health and wellness strategies and encouraging students to develop their own strategies, instructors can reduce stigma surrounding the

consequences of working with narratives and/or images of human suffering, distress, and/or violence (Brady et al. 390). They can also promote that health and wellness are priorities and that end results should not be the only focus in workplaces (Harr 77). Students can then carry these views and approaches into their professional fields (Harr 77). As these, now former, students move up in their industries, there is a great likelihood that they will share the views and approaches they built during their post-secondary education. Such views and approaches can then help normalize the consequences of working with human suffering, distress, and/or violence; foster ethical work environments and leadership; and establish health and wellness as priorities (Harr 77). Thus, if enough students have their views and approaches shaped in the ways I laid out above, over time industry-wide shifts in attitudes could take place.

Looking specifically at acting and the entertainment industry, the challenge is that training would need to shift for more than just actors. After all, it is relatively futile for actors to speak openly about their lived experiences with representing human suffering, distress, and/or violence unless there is also space for those experiences to be heard and accepted. Given this, education and training regarding the costs and rewards of representing human suffering, distress, and/or violence; the importance of health and wellness; and forms of attention and care should extend to all students studying aspects of the entertainment industry. This way, other entertainment professionals, including producers, directors, and artistic directors, will have the information necessary to support actors as they represent human suffering, distress, and/or violence. As I mentioned earlier, Clark and Gioro suggested that, in terms of health and wellness related to working with narratives and/or images of human suffering, distress, and/or violence, it is vital to

develop and maintain workplaces where employers and employees “value and attend to [one] another’s well-being” (86). This is in line with my participants’ desires to have more supportive, accepting work environments. For these environments to occur, however, it is necessary to provide education and training regarding the consequences of working with narratives and/or images of human suffering, distress, and/or violence, as well as forms of attention and care, to all students enrolled in entertainment based programs.

Such training and education feeds into building and maintaining ethical workplaces. In addition to the material already introduced above about the relationships between workplace environments, industry pressures, and employees’ lived experiences of working with narratives and/or images of human suffering, distress, and/or violence, scholars have also offered that ethical professional environments can increase productivity, output quality, creativity, and employees’ health and wellness (Iqbal et al. 80-81, 83). There are two key elements that contributed heavily to developing and maintaining these ethical environments: putting emphasis on process as well as product (Karnes 194), and superiors’ attitudes and behaviours (Iqbal et al. 82). Scholars considering ethical workplaces have argued that there is often a divide between solely results oriented environments and those where process is also deemed important (Stouten et al. 20). This latter approach is key to developing and maintaining ethical workplaces where employees’ health and wellness are priorities (Stouten et al. 20). In these workplaces, employees are valued as individuals rather than being framed as means to an end or, worse, as disposable commodities (Stouten et al. 20).

Throughout the history of entertainment, however, actors have often been positioned as low status, disposable, or even martyrs to be sacrificed in service of audience members' experiences. In addition, the arts now often face financial challenges, leaving most productions with extremely tight schedules and budgets. Historical views of actors and current scheduling and financial pressures feed into the present state of the entertainment industry, where phrases like "time is money", "leave your problems at the door", and "the show must go on" have been normalized. These phrases imply that actors need to be ready to take on any work asked of them, at any time, without concern, complaint, or moments of personal humanity. Thus, in its current form, the entertainment industry is largely product oriented. Research in other fields, however, has indicated that ethical work environments, where both product and process are prioritized, create stronger work overall (Karnes 194). Similarly, my participants clearly described that they did their best, deepest, most honest work in work environments where health and wellness was valued and both product and process were prioritized. Even in the best circumstances discussed, however, my participants noted there was further development necessary. In order for information regarding ethical workplaces to be disseminated and for there to be a shift in the importance given to actors' health and wellness within the entertainment industry, however, I would suggest that ethical workplace and leadership approaches; the consequences of representing human suffering, distress, and/or violence; the importance of health and wellness; and various forms of attention and care must be addressed in post-secondary education and training for students enrolled in acting, theatre, and film programs.

Unfortunately, this is not currently occurring in post-secondary programs, including actor training. Based on his ethnographic study, Seton concluded that “many actors are trained in unquestioning vulnerability to do and become whatever a director requires, without questioning the impact it has on them as embodied persons” (“The ethics of embodiment” 6). The acting teachers Seton observed in his research fostered unquestioning vulnerability as they felt it contributed to their students’ “future employability” (“The ethics of embodiment” 8-9). Given this and my participants’ reports about their education and training, I believe a loop is being created where students are being taught “industry standards” and pushed to comply with them, but these industry standards are often being established and enforced by individuals who went through the same training. Participants in my study, however, reported that current approaches to health and wellness in the entertainment industry are not ideal. Instead of feeding the industry standard loop, then, it is time to shift how health and wellness are approached in the training provided to actors, theatre artists, and filmmakers. To accomplish this, instructors and entertainment professionals need to stop presenting industry standards as an unchangeable, outside authority.

After all, instructors and current entertainment professionals can ensure students are provided with information about the process of representing human suffering, distress, and/or violence – including the rewards and the challenges; are taught that their health and wellness is a priority; and are encouraged to build their own attention and care systems. While these educational components may not reflect present industry standards, they could contribute to those standards shifting to better support actors as they represent

human suffering, distress, and/or violence. Education does not begin and end with post-secondary programs, however.

Continuing education and professional development are equally important and come in multiple forms. First, related to the entertainment industry, education can simply be providing information about the consequences of representing human suffering, distress, and/or violence, as well as forms of attention and care. Beyond that, however, on a structural level, employers can offer personal and professional development opportunities. For example, free, optional mindfulness meditation training could be made available in or through workplaces. Currently, mindfulness courses geared specifically to artists are available in a few major Canadian cities. These programs, however, generally require payment. For example, in Toronto, there is an eight-session mindfulness-based cognitive behaviour therapy course available through the Artists' Health Alliance and The Al & Malka Green Artists' Health Centre for \$380 ("Mindfulness-Based Cognitive Therapy"). Given my participants' statements about the financial difficulties actors often face, \$380 can be a significant financial commitment. In addition, mindfulness courses are focused on training, not on continued meditative practice. Employers and/or actors' unions wishing to provide professional development and structural forms of attention and care could offer mindfulness meditation sessions where actors who have not been exposed to the form can learn it and those already experienced with it can practice. This is just one example of the many possibilities that exist for professional development and continued structural forms of attention and care.

No matter what structural forms of attention and care are employed, however, it is important that actors' agency is respected. Participants in my study consistently wished

for greater levels of agency and dialogue with their employers. In addition, while participants sought stronger structural forms of attention and care, they wanted to ensure that these forms would be optional and that actors would remain in control of their health and wellness. Research in other fields has demonstrated that employees who identify themselves as having agency experience lower levels of stress and compassion fatigue, as well as higher levels of resilience and compassion satisfaction (Injeyan et al. 533-534). In addition, professionals with agency are more likely to build strong support systems and actively engage with them (Injeyan et al. 534). Thus, it is vital that actors' experiences and needs are heard, as well as that any structural forms of attention and care that are developed are not forced upon actors.

Although a number of issues have been discussed in this sub-section, this is just the start of conversations about structural forms of attention and care within the entertainment industry. Not all techniques addressed here will be appropriate for every workplace or desired by every actor. This is part of why dialogue about structural forms of attention and care needs to continue - and continue to include actors. There are no simple answers to most of the challenges and pressures of the entertainment industry; but, by continuing to discuss and develop structural forms of attention and care, actors and their employers can collaborate to build more supportive, ethical work environments.

Interpersonal Forms of Attention and Care

The third and final form of attention and care reported by participants in my study is interpersonal. Participants identified their interpersonal relationships with co-workers, friends, family, and significant others as vital components of their health and wellness.

Scholars in non-arts fields have broken down the ways in which interpersonal relationships can provide support to professionals who are working with narratives and/or images of human suffering, distress, and/or violence. Two key ways interpersonal relationships provide support are through acceptance and providing stability. The latter way is so important that several scholars declared loved ones a “refuge” from the costs of working with narratives and/or images of human suffering, distress, and/or violence (Harr 83). Loved ones can help professionals maintain full, rewarding lives outside their work, as well as separate their work and personal lives (Neumann & Gamble 346), both of which can assist in decreasing compassion fatigue and burnout while increasing resilience and compassion satisfaction (Udipi et al. 469).

Participants in my study described similar experiences, finding great comfort and support in their relationships with their loved ones, especially partners and children. This is in line with compassion research, which has shown that children have the ability to draw professionals’ attention away from their work and create strong separations between professionals’ work and personal lives (Udipi et al. 469). Children also generally bring a great deal of love and joy to professionals’ lives (Udipi et al. 469).

While interpersonal relationships, especially those with loved ones, provided my participants with support, it was difficult for those same participants to meet the demands of both their work and personal lives, especially while experiencing intense emotions and lingerings. As has already been discussed, participants reported that there were times when their work consumed them. Several participants were conflicted about this, feeling pressured to spend less time on their work but not feeling able to do so without compromising their performances. The inability to find an ideal balance between their

work and personal lives actually became a source of additional stress for some participants, who felt guilty and/or believed that being so invested in their performances indicated that something was wrong with them or their lives. On the other hand, many participants with children, especially recent parents, felt guilty for not being able to dedicate more time to their work. Interestingly, while many participants in my study felt unable to achieve work/life balance, they cited it as important and healthy. Work/life balance has been similarly promoted in vicarious trauma research (Cunningham 341-342) and compassion research (Harr 84).

Scholars focusing specifically on the issue of work/life balance, however, have put forward that general understandings of the term may be inaccurate and problematic. In fact, Paula J. Caproni argued that current approaches to work/life balance actually create more pressure, becoming counter-productive (46). By implying that individuals can develop and maintain perfectly balanced lives if they only make a greater effort, many approaches to work/life balance can lead to guilt and shame if the “right” level of attention to both work and personal aspects of life is not achieved at all times (Caproni 46). Caproni identified, however, that, as life is unpredictable and as there is a cultural ambivalence toward the non-work aspects of life, maintaining constant balance is impossible (52). Life is almost never in perfect equilibrium, and certainly does not remain that way. Therefore, trying to achieve work/life balance is, for the most part, an unachievable, frustrating, stressful goal (Caproni 52).

Instead of seeking balance, Caproni suggested that individuals attempt to live full lives, identifying what is important to them and pursuing these things in ways that foster feelings of joy (52). Caproni also noted that individuals’ priorities may shift over time as

part of the natural flow of life (52). If actors can release the pressure on themselves to establish and maintain an ideal work/life balance of professional and personal demands and, instead, prioritize the elements of their lives they are the most invested in and that need the most attention at any given time, this may help alleviate some of their stress, guilt, and shame. Thus, I encourage actors to shift from work/life balance models that tell them what their lives “should” look like to Caproni’s model that fosters self-acceptance, agency, acknowledgement of shifting priorities and the flow of life, and communication with loved ones.

The pressures my participants felt often did not begin and end with work/life balance. In fact, many participants felt pressured, judged, and stigmatized by several sources, including North American society. What are the potential consequences of these feelings? Scholars have demonstrated that stigma has repercussions on how the individuals who experience it are seen and engaged with (Harvey 175). These repercussions can include individuals being discredited and/or having their opportunities to participate socially limited (Harvey 175). In addition, individuals encountering stigma often internalize feelings of shame (Goffman 6). These can then lead to self-hate, attempts to hide the stigmatized element, and/or attempts to change (Goffman 6-9). While actors may only be partially stigmatized, stigmatized in certain realms, or move in and out of being stigmatized, these situations can still lead to longer term impacts on how actors’ statements are heard, what level of agency is provided to them, how they are approached in public, and/or how they approach themselves. Stigma can be challenged, however, through education (Goffman 116). Hopefully, as actors’ lived experiences of representing human suffering, distress, and/or violence are given further consideration

and acknowledgement, the stigma and judgment actors have faced will be challenged and will begin to dissipate.

Conclusion to Forms of Attention and Care

In this section, I explored my study's third and final core theme, examining personal, structural, and interpersonal forms of attention and care. Both the theoretical and practical sides of attention and care were considered. In order to accomplish this, I first scrutinized the theoretical side, addressing the relationship between my research and theories of ethics. I then analyzed the practical side, looking at vicarious trauma research and compassion research in relation to my study's third core theme. The material I have presented here allowed me to delve into forms of attention and care that actors currently employ, as well as those that they would like to see available in the future.

Conclusion to Chapter 5

This chapter has focused on the relationship between my study's three core themes and research and scholarship in other fields. As in chapter 4, interwoven realities were considered first. Here, the primary area of research I employed was phenomenology. I then looked at my second core theme, dealing with intense emotions and lingerings, in relation to vicarious trauma research and compassion research. Attention and care were then explored in relation to vicarious trauma research, compassion research, and theories of ethics. My next and final chapter addresses the

implications of my study, including what it can offer society-at-large and opportunities for future research.

CHAPTER 6 – CONCLUSIONS

Introduction to Chapter 6

In my last five chapters, I have thoroughly explored actors' lived experiences of representing human suffering, distress, and/or violence. Thus far, however, I have focused almost exclusively on actors and the entertainment industry. Throughout this sixth and final chapter, I expand my area of attention, looking toward the future and outside the sphere of professional acting. To begin, I consider potential future approaches to actors' lived experiences of representing human suffering, distress, and/or violence. I then lay out research already spawned by my work and opportunities for additional studies. From there, I conclude this chapter by addressing my research in relation to Western society in general, including present day attitudes to encountering narratives and/or images of human suffering, distress, and/or violence.

Straddling the Divide

Over the last two chapters, I have established and reflected upon the three core themes that were identified in my study. It is equally important, however, to look at the questions those themes raise regarding how professional Canadian actors and their work are seen. To bring these questions to light, I first look at how I saw the divide between scholars and practitioners play out in my interpersonal interactions. I then lay out two factors that I believe contributed to this divide and to how some practitioners have approached my research.

When speaking with me about my study, practitioners often ask if I am suggesting that actors should avoid all roles that require them to represent human suffering, distress, and/or violence. This question is generally accompanied by a tone of concern or, at times, even suspicion. The tone is not surprising, however, given the frequently difficult relationship between acting scholarship and practice, especially in relation to the topic of representing human suffering, distress, and/or violence. Concerns about acting scholarship that have been raised by practitioners, including many of my participants, have focused on issues such as: the lack of primary research into actors' lived experiences, actors' experiences being framed through trauma and vicarious trauma theories, and the use of prescriptive approaches to actors' health and wellness. While issues related to the actors' experiences being framed through trauma and vicarious trauma theories have been discussed in previous chapters, it is important to more fully address the lack of primary research into actors' lived experiences and the use of prescriptive approaches to actors' health and wellness.

Until my study was launched, there was no primary research data available regarding professional actors' lived experiences of representing roles that include narratives and/or images of human suffering, distress, and/or violence. In spite of this, numerous scholars have put forward arguments about what actors "may be" or "are" experiencing when representing human suffering, distress, and/or violence. These arguments have generally been based on some combination of the scholars' own theories, research conducted with non-arts professionals, and/or observations of post-secondary acting students.

The choice to use these elements instead of conducting primary research or, even, speaking with professional actors has led many practitioners to express concerns about professional actors without directly engaging with them or their experiences. Some practitioners have even argued that scholars have shown a lack of interest in actors' voices and/or have exploited actors' experiences for academic advancement. Questions have also been raised about the validity of scholars' arguments about the lived experience of representing human suffering, distress, and/or violence. Practitioners have critiqued published scholarship on this topic, identifying multiple assumptions and inaccuracies. These assumptions and inaccuracies have made it difficult for practitioners to engage with or employ scholarship related to the consequences of representing human suffering, distress, and/or violence.

Despite the lack of primary research and the concerns practitioners have raised, scholars theorizing about professional actors' health and wellness when representing human suffering, distress, and/or violence have consistently made prescriptive statements about what actors "should" and "should not" do. This has left some practitioners feeling condescended to by scholars. A number of participants in my study described that academics have not and do not acknowledge actors' intelligence or experience, especially in relation of representing human suffering, distress, and/or violence. In addition, some practitioners have not felt comfortable engaging with academics' prescriptions and/or have not believed that the academics understand the realities of professional actors' experiences.

Given the material I laid out in the previous two paragraphs, it is clear that my participants put a great deal of trust in me and my study. In light of this trust, I feel a duty

to put forward a new way of approaching actors' health and wellness that reflects actors' understandings of their work and their health and wellness. I introduce and discuss this new approach in the next sub-section.

In this sub-section, I addressed the relationship between academics and practitioners, as well as between practitioners and scholarship that focuses on the consequences of representing human suffering, distress, and/or violence. Concerns that practitioners have raised about this scholarship were laid out. I gave additional attention to two concerns: the lack of primary research into actors' lived experiences and the use of prescriptive approaches to actors' health and wellness. Finally, I concluded by laying out the need for a new approach to actors' health and wellness.

Shifting Approaches

In chapter 5, I suggested a move from understanding actors' lived experiences of representing human suffering, distress, and/or violence through a medical model to a compassion-based model. A shift in model, however, is not enough. Therefore, I now turn my attention to the overall approach through which actors' experiences are framed in North America. To begin, I introduce a metaphor for the approaches that have often emerged in scholarship surrounding the consequences of representing human suffering, distress, and/or violence. From there, my proposed new approach and an associated metaphor are introduced. Then, to conclude, I examine how the new approach relates to practitioners' concerns about how actors' lived experiences of representing human suffering, distress, and/or violence have been framed.

Most scholars' approaches to actors' health and wellness can be expressed through the metaphor of contracting an illness. Within these approaches, actors are seen to encounter health and wellness "problems" that are "caused" by representing human suffering, distress, and/or violence, just as an individual can contract an illness caused by exposure to a virus. These approaches then support scholars' use of medical models and positioning of the consequences of representing human suffering, distress, and/or violence as vicarious traumatic stress, vicarious traumatic stress disorder, or post-dramatic stress - a term Seton used to refer to the vicarious traumatic stress he believed actors experience in relation to their work.

Adding to the illness metaphor, current approaches suggest that actors' "vicarious trauma" manifests itself through a number of "signs" and "symptoms". Scholars have stated or implied that, once these signs and symptoms appear, they will continue until they disappear (as with independent recovery from an illness) or, more likely, until a professional intervenes to "correct" the situation (as with a doctor providing treatment for an illness). The intervening professional can be a member of the medical community or an academic who informs actors of what they "should" and "should not" do to get better. In some cases, actors may see a return to health (the illness is cured). It is presented as more probable, however, that actors will simply be able to ease the intensity and/or frequency of their signs and symptoms, probably with the assistance of long-term medical or quasi-medical supports (the illness becomes chronic but can be managed). In extreme cases, signs and symptoms can continue with full intensity, requiring powerful, long-term care (persistent illness that requires ongoing medical intervention). While I have laid out this approach, describing it through an illness metaphor, I want to make it

clear that I do not agree with the approach, nor endorse the language and framing employed within it.

Given this, I propose a new, contrasting approach that can be best explained through the metaphor of physical training. While conducting my study, I took up weightlifting. When starting a training program, such as weightlifting, an individual may decide to work with a trainer. If so, then the individual generally meets with the trainer to learn techniques and establish personal strengths, weaknesses, goals, and limitations. Following that, the individual engages in consistent training to build muscle strength and body resilience. Ideally, their training is a gradual process that values practice, technique, and developing strength and resilience over time.

One goal for some individuals in training is to learn the skills to eventually workout independently; and, by that point, to have the technique and experience necessary to attend to their personal goals, as well as their safety, health, and wellness. Many gyms and training centres offer support to individuals who workout independently, including opportunities to connect with peers, assistance with equipment, training in how to use new equipment, spaces to rest or meditate, and health and safety information. While the supports available at gyms and training centres are not perfect and there is plenty of room for improvement, there is a general acceptance in these spaces that health and wellness is vital when engaging in disciplines such as weight lifting, as well as that personal, structural, and interpersonal forms of attention and care are necessary to maintain such health and wellness.

It is also usually accepted that fitness results and health and wellness are not just influenced by what happens during workouts and training sessions. Pre- and post-

workout periods are considered equally important, as are overall forms of attention and care. Pre-workout or before any competition or test of strength, there are several forms of attention and care individuals are taught or learn to employ. For example, weightlifters are taught to eat full meals that provide sufficient energy before working out. In addition, lifters learn to prepare their body/minds through warm-ups and pre-lifting regimes. This preparation includes getting mentally focused, as that is seen as a key component of maintaining safety, health, and wellness while lifting. Just as the pre-workout period is used to prepare and focus the body/mind, the post-workout period becomes a time for relaxation, recovery, and replenishment. Cooling down, re-hydrating, and eating appropriately are just three of the ways lifters are taught to care for themselves following a workout or feat of strength.

Overall health and wellness are also emphasized. Trainers often endorse various forms of general attention and care, including: eating well and at regular periods, getting eight hours of sleep, and participating in meditation or yoga. Each of these forms is intended to support overall health and wellness, as well as to contribute to physical, mental, and emotional resilience. Driving all these forms, however, is the attitude that health, wellness, safety, and resilience are all important and deserving of attention.

This focus on health and wellness does not mean that workouts, including weightlifting, do not carry costs. Trainers and weightlifters are generally open about the role of stress in working out. In fact, an integral part of the training process is putting the body/mind under targeted stress, but doing so without reaching the point of injury. When the optimal level of targeted stress is achieved, the body/mind strengthens itself and increases its muscle mass.

This process of placing targeted systems under stress in a controlled environment can lead to a range of costs, including but not limited to: soreness, aches and pains, exhaustion, and discomfort. Since these costs are openly discussed and widely accepted, however, they usually do not come as a surprise. Lifters, even those working out independently, also have a range of resources available to them to help them ensure they build and maintain appropriate forms of attention and care to assist them when they encounter costs. In addition, there are rewards that emerge, including greater health, fitness, improved mood, and resilience. Lifters may also experience joy and feelings of fulfillment as they push themselves, increasing their body/minds' strength and resilience.

While rewards and costs are considered a normal part of the weightlifting process, trainers do differentiate between costs and injury. Similarly, weightlifters are not trained to accept nor ignore injuries. In fact, injuries are avoided at all costs in many gyms and training centres, as they threaten both lifters' health and wellness and their workout results. Various supports – including forms of pre- and post-workout care, use of safety procedures and proper technique, staff ensuring equipment is used appropriately, and open communication with peers and/or trainers – are employed specifically to reduce the likelihood of injuries. If an injury does occur, lifters are encouraged to engage with the appropriate health professionals. Any engagement with medicine and medical models is then left up to the injured lifter.

The situations I laid out here are ideal, so may not occur in all gyms or with all trainers. I believe, however, that the metaphor of fitness, especially weightlifting, offers much to the entertainment industry. An approach that fits with the metaphor of weightlifting can bring a whole new framing to actors' lived experiences of representing

human suffering, distress, and/or violence. The first important element of this new approach is costs being seen as a natural part of human experience. In fact, as with soreness or stiffness for weightlifters, certain costs can occur because body/minds are processing stress they have been under, healing themselves, and – at times – even developing.

My proposed approach also takes from weightlifting the concept of there being a level of cost that is not just a part of human experience but an indicator of personal growth. This is not to suggest that such growth is easy or that it does not require support through various forms of attention and care. When support is available and engaged with, however, individuals may discover value and rewards on the other side of the costs they encounter. They may even find themselves stronger, more resilient, and proud of the journey they have taken.

Drawing on weightlifting, my new approach creates space for rewards to be acknowledged and accepted. This is a significant shift from previous approaches, where scholars have often forced experiences into dichotomies, such as healthy/sick or challenging/rewarding. Within my approach, however, the complexities of life are acknowledged and embraced. It is accepted that costs and rewards can exist simultaneously and, at times, even be intertwined.

This approach also separates cost and injury, providing space to recognize and address the latter. While it is important to acknowledge the rewards actors can encounter while representing human suffering, distress, and/or violence, it is equally vital not to erase the experiences of actors who do feel injured by their work. In these cases, I would recommend a similar approach to weightlifting, where individuals are encouraged to seek

the appropriate medical professionals; are provided with access to such professionals, if requested; and are supported if they choose to engage with these professionals.

The most important shift from previous approaches to my proposed approach is agency. Previous framings have frequently disempowered actors, essentially turning them into patients and making their views about their experiences secondary to scholars' "expert opinions". Looking to weightlifting, it is clear that there are alternative, empowering approaches to health and wellness where support and information is available, but individuals are seen as the experts on their body/minds and experiences. The approach I am proposing similarly positions actors at the centre of their health and wellness.

Respecting actors' agency in relation to their health and wellness includes embracing this agency in the workplace. In chapter 4, I laid out one of my participant's arguments that "[performers] have to be able ... to say, 'I don't think I'm comfortable doing this' and be in a situation in the room where ... that's perfectly valid" (Interview 19). This participant identified that being able to voice concerns and, if necessary, refuse material could help prevent actors from feeling forced to overstep their boundaries, potentially damaging their health and wellness (Interview 19). Similarly, the participant felt it could assist actors in not overstepping their co-workers' boundaries (Interview 19). In order for actors to have this agency in the workplace, there needs to be a shift from the entertainment industry's current paternalistic, hierarchical system to a more collaborative approach where actors are respected as having domain over their health and wellness choices, both in the workplace and outside it.

Thus far, I have argued the need for employers to build and maintain support systems and the importance of employers not taking a paternalistic approach toward actors and their health and wellness. What is the line, however, between support and paternalism? As with the weightlifting metaphor, my proposed approach relies on a collaborative framework where actors and their health and wellness are supported by multiple people. Within this approach, employers could focus on providing forms of attention and care in their workplaces; creating ethical environments; and ensuring actors are fully informed about the consequences of representing human suffering, distress, and/or violence. The details about forms of attention and care in workplaces and ethical environments were covered in chapter 5, in the Structural Forms of Attention and Care sub-section. By focusing on the three areas I just listed, employers would support actors who have been hired to represent human suffering, distress, and/or violence.

Engagement - or lack of engagement – with forms of attention and care, however, would remain up to each actor. Actors would be trusted to maintain their health and wellness, employing forms of attention and care as needed and indicating if they require additional assistance. Placing actors at the centre of their health and wellness, trusting their decisions regarding it, listening to their requests for support, respecting their agency in work environments, and remaining non-judgmental about the costs of representing human suffering, distress, and/or violence all help protect against paternalism. In addition employers need to ensure that they are not trying to “save”, “cure”, or control actors.

In order for my proposed approach to succeed, however, actors need to feel comfortable openly expressing their needs and engaging with supports. This cannot happen while actors are being stigmatized or judged for their lived experiences of

representing human suffering, distress, and/or violence. Even now, though, there are scholars and entertainment professionals who continue to believe that, if the medical model is not used and if academics, psychologists, and/or other experts do not step in, actors will fail to understand and/or address the costs of representing human suffering, distress, and/or violence, resulting in them becoming seriously harmed, or will co-opt workplaces for personal therapy, undermining productions. There are also entertainment professionals who argue that workplaces should not encourage open communication nor offer forms of attention and care. These positions are a return to the idea that actors cannot be trusted and demonstrate that attitudes toward actors and their experiences still need to evolve. Hopefully, research and education will assist in this evolution.

Thus far, I have encouraged trusting actors' agency regarding engagement – or lack of engagement – with their health and wellness, as well as with forms of attention and care. There is one exception to this, however, that was supported by participants in my study. In cases involving significant injury or illness, participants argued that actors should be encouraged to seek appropriate medical assistance, and should receive help in finding it. Just as there is a line between the costs of weightlifting and physical injury, it is vital that a line be drawn between experiencing costs related to representing human suffering, distress, and/or violence and encountering significant injury or illness. If that line is crossed, my participants suggested that actors' employers, co-workers, and loved ones need to step in, ensuring that actors realize what is occurring and seek assistance. In such situations, actors' health and wellness enters the realm of medical professionals and/or alternative health professionals. The greatest services employers can offer in these situations are avoiding judgment, ensuring actors have access to medical and/or

alternative health professionals, reducing the stigma around engaging with these professionals, and fostering interpersonal connection and support.

While there remains much ground to tread, I believe the industry is beginning to realize the importance of actors' safety and health and wellness – in general and in relation to representing human suffering, distress, and/or violence. Increasingly, celebrity actors are opening up about the consequences of representing human suffering, distress, and/or violence (Elizabeth; Hogan; Nordine), furthering the process of normalizing them. In addition, Tonia Sina, Alicia Rodis, and Siobhan Richardson have started Intimacy Directors International, which choreographs “[m]oments of [i]ntimacy in performance” (“Intimacy Directors International”). Sina, Rodis, and Richardson have essentially taken the model of fight direction and applied it to moments of intimacy to develop “a practice which empowers actors to respect their own boundaries while improving the quality and clarity of scenes of intimacy” (“Intimacy Directors International”). With continued attention and action, I believe the entertainment industry will evolve to better support actors' health and wellness and address the consequences of representing human suffering, distress, and/or violence.

Throughout this section, approaches to actors and representing human suffering, distress, and/or violence have been considered. To begin, I laid out a metaphor to describe previous approaches to the consequences of representing human suffering, distress, and/or violence. From there, I proposed a new approach and associated metaphor, exploring what this approach and metaphor could offer to actors. The approach and metaphor were then addressed in relation to previous concerns regarding actors' health and wellness, as well as forms of attention and care. This section's discussions

have opened the door to new ways of framing and understanding actors and their work with narratives and/or images of human suffering, distress, and/or violence. Opening the door, however, is just the first step. There remains much room for further development and research - a topic I consider next.

Further Research

While my study has much to offer actors, acting scholarship, and the entertainment industry, research into representing human suffering, distress, and/or violence has just begun. There are numerous areas of study that remain to be explored. In this section, I address several of these areas. To achieve this, I first lay out studies that were inspired by and emerged in the wake of my research. Following that, I consider potentially rich areas for future study. Together, these two discussions outline where research related to representing human suffering, distress, and/or violence is headed.

My study focused on professional Canadian actors. Actors' health and wellness, however, is not a specifically Canadian topic. Along the same lines, the consequences of representing human suffering, distress, and/or violence are not confined to Canada. This international relevance may have contributed to a growing interest in my study, both in Canada and abroad. After information about my study, including the themes that were identified in it, were disseminated to theatre scholars and acting scholars through conference papers and journal articles, similar research was initiated in Australia and England. This research points to growing interest in actors' overall health and wellness, as well as the consequences of representing human suffering, distress, and/or violence. This interest is promising as it would seem to indicate scholars' willingness to engage

directly with professional actors and their lived experiences. Should studies into the consequences of representing human suffering, distress, and/or violence continue, it may soon be possible to compare research cross-culturally, allowing for more in-depth understandings of professional actors' lived experiences and, perhaps, the nature of empathy and/or compassion globally.

In addition to international research, there are areas that future North American studies could assist in exploring. One key follow-up would be looking into actors' lived experiences of representing human suffering, distress, and/or violence in specific areas of the entertainment industry. Although participants in my study spoke broadly about their lived experiences and all worked in theatre, film, and television, my primary focus in this dissertation has been theatre. Thus, there could be value in continuing to establish the unique aspects of representing human suffering, distress, and/or violence in various mediums, such as film, television, and new media. In addition, there would be value in further research addressing the specific challenges and rewards of representing human suffering, distress, and/or violence in a range of genres, including but not limited to: drama, thriller, horror, farce, and sitcom.

I also believe it is important to expand beyond actors when considering the lived experience of representing human suffering, distress, and/or violence. This expansion would include studies that focus on other entertainers, such as singers, dancers, improvisers, and stand-up comedians. Beyond entertainers, further research is necessary to explore the lived experiences of members of production teams and crews, including directors, writers, stage managers, and cinematographers. While actors and other entertainers are the ones who represent human suffering, distress, and/or violence,

production team and crew members still encounter and work with these representations. Given this, I believe it is vital to investigate the lived experiences of non-performing theatre, film, television, and new media professionals.

Looking outside the entertainment industry, there are numerous studies that have been conducted with professionals in non-arts fields and that address the potential consequences of working with narratives and/or images of human suffering, distress, and/or violence. While many of these studies use vicarious trauma models, compassion-based models are becoming increasingly common. As research employing compassion-based models multiplies, it may become possible to conduct meta-analyses that consider the consequences of working with narratives and/or images of human suffering, distress, and/or violence in both arts and non-arts fields. Such meta-analyses could allow scholars to dig into the larger lived experience of engaging with narratives and/or images of human suffering, distress, and/or violence in work environments, contributing to a greater understanding of humanity and human experience.

Another area of research that could provide important insights regarding the larger, human experience of encountering narratives and/or images of suffering, distress, and/or violence exists outside work environments. As yet, there has been little research attention paid to individuals' lived experiences of encountering narratives and/or images of human suffering, distress, and/or violence in their personal lives, including what forms of attention and care these individuals employ. While it would require considerable resources to undertake, extensive research in this area could provide important insights to numerous scholarly fields and reveal important information regarding human experience, interpersonal relationships, empathy, sympathy, and compassion. Such research would

seem to be vital now as the themes that were identified in my study and several of the studies I have explored in this dissertation challenge present understandings of and approaches to the consequences of encountering narratives and/or images of human suffering, distress, and/or violence.

In this section, additional research has been considered. To begin, studies that emerged in the wake of my work were introduced. From there, I looked at potential future research. First, I considered further studies that could be conducted within the entertainment industry. I then discussed future opportunities for meta-analyses of research related to arts and non-arts professionals, as well as for studies that examine individuals' lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence in their personal lives. Having identified potential areas for further research, I now turn to what the themes I discovered regarding actors' health and wellness can offer to North American society.

The Importance of Actors' Health and Wellness to North American Society

In chapter 1, I explored the question several entertainment industry employers had raised about why they or society should assume any responsibility for actors' health and wellness. In light of my research, however, I now return to the question of whether or not society bears any ethical responsibility in relation to the health and wellness of actors who represent human suffering, distress, and/or violence. To reconsider this question, I begin by laying out what my study has revealed about actors' lived experiences of interacting with the public, including the assumptions and judgments actors encounter. I then speak to what representing human suffering, distress, and/or violence can offer on

personal, interpersonal, and societal levels. Following that, the section concludes with a brief argument about the importance of society developing and maintaining an interest in actors' health and wellness.

My study has demonstrated that actors have a complex relationship with individuals who work outside the entertainment industry or, as some participants referred to them, "civilians". On one hand, actors dedicate themselves to exploring humanity and human experience. They also perform for others, often describing their work as being in service to audiences. At the same time, however, as was introduced in chapters 4 and 5, outside of their work, actors frequently feel judged and/or misunderstood by the general public. According to many of my participants, individuals working outside the acting profession generally do not have concern for actors' health and wellness nor an accurate understanding of the work involved in representing human suffering, distress, and/or violence.

The general public may not understand the work involved, but they certainly benefit from actors representing human suffering, distress, and/or violence. Academics looking into the power of performance have demonstrated that theatre has the ability to create changes in audience members' beliefs, emotions, and actions (Dolan 1; Dupuis et al. 1048-1050; Snyder-Young 1-3; Wilmeth & Bigsby 20). These changes include altering how audience members approach and treat themselves and others (Dolan 1; Dupuis et al. 1048-1050; Snyder-Young 1-3; Wilmeth & Bigsby 20). For example, Sherry L. Dupuis, Gail Mitchell, Christine M. Jonas-Simpson, Colleen P. Whyte, Jennifer L. Gillies, and Jennifer D. Carson's study, looking at the consequences for health professionals and caretakers of seeing *I'm Still Here*, a theatre production that involved

narratives addressing dementia and assisting those with dementia, found that watching the production sparked self-reflection in audience members (1046). This reflection fed into both short-term and long-term personal growth, including shifts in how health professionals and caretakers saw themselves and their work (Dupuis et al. 1048-1050).

Health professionals and caretakers also experienced transformations in relation to how they understood and engaged with individuals with dementia (Dupuis et al. 1048). In fact, *I'm Still Here* consistently shifted audience members' beliefs about individuals living with dementia from thinking that these individuals have "worthless" lives to "recognizing the possibility for quality of life" (Dupuis et al. 1048). As this example illustrates, representations of human suffering, distress, and/or violence have the ability to foster compassion, empathy, and interpersonal connections (Dolan 41; Dupuis et al. 1049), as well as challenge audience members' assumptions (Dupuis et al. 1048).

Representations have even been shown to shift audience members' behaviour. For instance, Dupuis and her colleagues demonstrated that, after seeing *I'm Still Here*, healthcare professionals and caretakers sought to provide greater assistance to individuals living with dementia (1048). In addition, *I'm Still Here* sparked an increased desire in its audience members to engage with dementia related issues on a broader, social level (Dupuis et al. 1048). This is in line with theatre research, which has demonstrated that watching representations of human suffering, distress, and/or violence can spark audience members' social consciousness (Dolan 2-3). Interestingly, the personal, interpersonal, and social shifts that have been laid out in this section occurred even when audience members did not feel they had been changed, a situation Dupuis and her colleagues labeled as *unchanged changing* (1046).

Theatre, in particular, is in a unique position to initiate change in audience members. One key element in theatre's ability to initiate this change is what Arthur Frank dubbed *thinking with stories* (Dupuis et al. 1046). Thinking with stories creates situations where "by engaging with someone else's story we are able to rethink our own" (Dupuis et al. 1046). In addition to thinking with stories, theatre can spark audience members' emotions. According to Dupuis and her colleagues, this "emotional embodied response ... is one of the most powerful aspects of theatre. What produces a strong emotional response can move us to reflection and in that reflection new learning can happen" (1050).

The arguments introduced above demonstrate the vital personal, interpersonal, and societal contributions representations of human suffering, distress, and/or violence make. In order for these representations to have such an impact, however, skilled actors are often required. Thus, it is clear that actors make significant contributions to society and its members. In fact, actors' ability to foster compassion, interpersonal connection, and social consciousness could be seen as an integral component of building and maintaining a strong, healthy society. It would, thus, seem to be in the general public's and society's interests to encourage and support actors' health and wellbeing. This is in addition to the care that ethicists have already suggested individuals owe to one another (Badiou 91; Levinas, *Entre Nous* 103; Rainsford & Woods 96).

This section has focused on the relationship between the general public and actors who represent human suffering, distress, and/or violence. To explore this topic, I opened with my participants' reports about how they felt the general public saw them. I followed that with an examination of the value representations of human suffering, distress, and/or

violence offer to audience members and to society. I then closed with a look at why the general public and society should be invested in actors' health and wellness.

Current Understandings of Health and Wellness in North America

Thus far, I have focused almost exclusively on professional actors and the entertainment industry. Now, I turn to the broader societal implications and applications of my research. Before digging into these implications and applications, however, I must lay out current North American approaches to and attitudes regarding encountering narratives and/or images of human suffering, distress, and/or violence. In order to do this, I first consider current North American understandings of pain, suffering, and death, as well as the concerns scholars have raised about these understandings. From there, I examine the role of judgment and stigma when encountering narratives and/or images of human suffering, distress, and/or violence. Finally, I conclude with a discussion of the commoditization of human experience, including empathy and compassion. The material I delve into here provides the foundation for my next section, which attends to the societal implications and applications of my research.

Theorists, researchers, and individuals working outside the academy have brought up concerns about North American society's avoidance and/or pathologization of pain, suffering, and emotion (Kitayama & Cohen 751). These concerns have generally been tied to the belief that, within North America, emotions, emotionality, and human experience are socially policed, with some being positioned as "good" and others being positioned as "bad" (Kitayama & Cohen 751). Pain, suffering, and distress are usually placed into the bad category, being seen as experiences to be avoided, to be rescued from,

or to rescue others from (Downing 41-42). Raymond Downing confronted this topic head on when, addressing medical doctors' work in America, he put forward that:

we have not thought about helping our patients suffer, we have instead sought ways to eliminate suffering. Our focus is on getting rid of pain, not giving it meaning ... The focus of our biomedical paradigm is on the mechanisms of pain and the techniques for its relief ... It works so well that we have stopped trying to live with pain [and suffering], waiting only for the next technology that will take it away. (41-42)

Downing further argued that positioning pain as something to be cured or avoided can undermine individuals' abilities to process it. Thus, when pain, suffering and/or distress do occur, individuals may not have developed the resilience and support systems necessary to cope (Downing 41-42). In fact, Downing maintained that, "our obsessive commitment to eliminating pain may only make the pains we can't relieve more intolerable" (42).

This is extremely problematic as pain, suffering, and distress are, at times, unavoidable (Downing 42). No matter how much effort has been put into doing so, North American society remains unable to eliminate these three human experiences (Downing 42). Ivan Illich suggested that this is because pain, suffering, distress, and even death are aspects of the human condition ("The Killing of Pain"). Due to this, he believed it is important to encourage resilience and support individuals when they are confronted with these unavoidable aspects of life ("The Killing of Pain"). Research has demonstrated that, if resilience and support are not given attention and if the goal is always to avoid pain, suffering, and distress, a number of personal, interpersonal, and social issues may emerge

(Illich “The Killing of Pain”). This is not to suggest that this is a simplistic cause and effect situation, but, rather, to demonstrate that complex, interwoven relationships exist between approaches to pain, suffering, distress, and death and a range of personal, interpersonal, and societal health and wellness concerns.

Thus far, in this section, I have focused on North American approaches to pain, suffering, distress, and/or death in general. Given the scope of my study, however, I now also turn my attention to North American approaches to the consequences of encountering narratives and/or images of human suffering, distress, and/or violence. Such narratives and/or images can come into individuals’ lives through a variety of means, including but not limited to: engaging with the news, watching television shows, seeing movies, playing video games, reading, surfing the internet, looking at social media, or conversing with others. While there are numerous ways through which individuals can encounter narratives and/or images of human suffering, distress, and/or violence, there is a consistent North American cultural belief about the consequences of encountering these narratives and/or images. This belief is based in the notion that individuals “should” not feel deeply about or encounter consequences in relation to experiences that are “not their own”.

This belief can be best explained through a case study looking into workplace leave. In Canada, workers have access to Employment Insurance compassionate care benefits to care for a loved one who is dying or at risk of death (“Employment Insurance Compassionate care benefits”). Not all loved ones, however, are given equal weight. Employees who are losing immediate family members, including certain in-laws, are able to qualify, while many friends cannot (“Employment Insurance Compassionate care

benefits”). Similarly, workplaces will often allow employees to take extended periods off for the death of an immediate family member, but will allow no or limited time away for the death of an extended family member. Friends’ deaths would not even be covered under many workplaces’ compassionate leave policies. If an employee asked for compassionate leave to grieve a public figure, such as Robin Williams, s/he might be confronted with incredulity or questions about his/her sanity.

This case study of workplace compassionate leave indicates some basic, cultural assumptions about and constructions around grief. These assumptions and constructions work together to establish which relationships are “important” or “worthy” of grief, as well as what level of grief is “appropriate”, what kind of grief is “right”, how grief “should” be performed, and who “owns” the grief in any given situation. This social regulation, however, denies that grief is an exceptionally personal experience. What about the child whose parents were abusive, but who was comforted by watching Robin Williams’ movies? Is it not possible that, by adulthood, this individual could feel a closer emotional bond to the public persona of Robin Williams than to family members? What about those who find themselves unable to get out of their beds for days after the passing of family pets or individuals who find themselves lacking any emotion following the death of their spouses? How would employees asking for a compassionate leave day to process grief related to news stories be handled?

In spite of personal differences toward and unpredictable consequences in relation to death and grieving, many workplaces re-enforce normative cultural assumptions and constructions regarding grief. I am not arguing for immediate policy change. Workplaces are complex and policies require a great deal of discussion that is outside the scope of this

dissertation. I put forward the case study in order to demonstrate North American assumptions and constructions around one form of pain, suffering, and distress - grief. Of particular interest to me is the assumption and construction of ownership in relation to pain, suffering, and distress. This ownership suggests that experiences belong to certain individuals and not to others. Generally, the breakdown is established as follows: the greatest ownership belongs to the individuals who directly encounter pain, suffering, and/or distress; the next level of ownership belongs to those individuals' immediate family members and loved ones; the level after that includes distant family and casual friends; after that are acquaintances; then, in relation to public figures, perhaps their fans. With each level, the amount of ownership is seen to decrease, while those who do not fit any level are positioned as having no ownership.

The amount of ownership society acknowledges a person having in experiences of pain, suffering, and/or distress decides what amount of emotionality and which consequences are deemed "appropriate" and "healthy" (Govier 63). Individuals who are not seen to have any level of ownership are expected to have no emotionality or consequences. This current notion of ownership of pain, suffering, and/or distress is highly problematic and, in the next section, I use my research to challenge it.

This challenge is important as, from an early age, individuals' views on and attitudes toward pain, suffering, and distress are shaped by these cultural assumptions and constructions. The fact that cultural assumptions and constructions of ownership and appropriate emotionality and consequences exist, are taught, and are reinforced within North America, however, does not mean that people's experiences necessarily fall in line. Looking specifically at encounters with narratives and/or images of human suffering,

distress, and/or violence, admitting that one is experiencing consequences that do not meet societal expectations can be extremely difficult and often leads to personal and interpersonal judgment and/or stigma.

In my quotidian life, I have heard many loved ones, friends, acquaintances, and strangers who have encountered narratives and/or images of human suffering, distress, and/or violence say some version of the statement:

This narrative and/or image I encountered is having a profound impact on me. I was not expecting to have this reaction. I do not know why I am experiencing such deep consequences in relation to the material. I do know, however, that the material I encountered is not my direct experience of human suffering, distress, and/or violence and does not line up with a similar experience in my life; so, therefore, I have no right to the consequences that are occurring or to seek out support for them.

While this statement shows personal judgment, I have also seen numerous examples of interpersonal judgment and stigma. It is now common to see people confront one another, both online and in person, for being profoundly touched by and experiencing consequences in relation to narratives and/or images of human suffering, distress, and/or violence. While the language used varies, the central idea is always that the individual being confronted has no right to experience consequences as s/he has too little or no ownership in the narrative and/or image of human suffering, distress, and/or violence.

I stumbled upon a compelling example of this while having lunch with a friend, who I will refer to as *Sam*. Sam confided in me that she was experiencing powerful consequences, including intense emotions and lingerings, after learning that a friend of a

friend had passed away from a terminal illness. Following the death, Sam had spent considerable time with her friend, providing support and listening to stories about the terminally ill woman's life, how her illness had progressed, and how devastated her loved ones were by her life being cut short. By the time Sam and I were at lunch, she was distressed by the consequences she was experiencing, but was embarrassed to openly admit to them as she felt that the terminally ill woman's family and friends were the only ones who had the right to grieve her passing. Not having gotten to know the woman personally, Sam believed the consequences she was encountering were selfish. More than that, she was certain that the consequences demonstrated that, overall, she was a selfish person. Sam's beliefs regarding this situation had been supported by some of her loved ones, who had commented that she should stop "creating drama" and "making a tragedy [she had] nothing to do with about [herself]".

I would argue, however, that the consequences Sam was encountering had nothing to do with creating drama or being selfish. In fact, she had dedicated a great deal of time to supporting her grieving friend. While providing this support, Sam had been forced to face the reality that, in time, she would probably be the one grieving the loss of a close friend or family member. This had left her worried about her loved ones' health. She had become obsessed with checking in with those loved ones and ensuring she told them everything she wanted them to know in case they suddenly died.

Sam had also been confronted with her own mortality. Although she did not know the terminally ill woman directly, this was the first time someone her own age and so close to her life had died from an illness (rather than a car accident or suicide). Sam explained that she and the woman who had passed away were from the same hometown,

had gone to the same schools since kindergarten, and had shared a number of friends. They had even been born in the same hospital. In many ways, Sam felt that she could have been this woman. Although, intellectually, Sam had already known that terminal illnesses can occur at any age, she had never truly accepted that idea before. Like so many other people, she had pictured serious health conditions and terminal illnesses as situations that happened to elderly strangers. Suddenly having the emotional realization that she could encounter a terminal illness at any time had shaken Sam, leaving her feeling frightened about her health and unsure about how to process her own mortality.

Ultimately, Sam had experienced a loss. This was not the loss of a friend or loved one, but of feelings of safety, security, and stability. These losses had then undermined Sam's joy and her sense of meaning in life. Finally, she had lost a certain level of innocence, as her eyes had been opened to the fragility of life. These losses are not the same as losing a loved one, and Sam never compared her experience to those of the people who were close to the woman who had passed away. Nevertheless, Sam had encountered her own losses related to her interactions with narratives of another's illness and death. Sam was also experiencing consequences related to interactions with her friend and felt the need to seek out attention and care.

Certainly, there were ways of handling the consequences she was encountering that would have positioned Sam as the centre of attention and could have drawn care away from the individuals grieving the loss of their loved one. If this had occurred, however, the issue would not have been the fact that Sam was experiencing consequences, but how she handled those consequences. Of course, there are some people who may respond to encounters with narratives and/or images of human suffering,

distress, and/or violence in ways that hurt or draw attention and care away from others. Similarly, there are people who hurt others and draw attention and care away from them across a variety of other situations, including getting married, being promoted, and celebrating birthdays. The fact that some people behave in hurtful ways, however, is not a reason to assume that all individuals who encounter consequences related to engaging with narratives and/or images of human suffering, distress, and/or violence are inherently being selfish.

Returning to Sam's case, she consistently acted compassionately and selflessly, making herself available day and night to help support her friends, many of whom had been close to the woman who had passed away. Even though, by this point, Sam was experiencing intense emotions and lingerings, when she had been asked to attend the funeral to provide support to her close friend, she had gone. While there, Sam had not mentioned her experiences at all, focusing on providing care to her friends, even when that care had come at a cost to her.

Realizing she needed attention and care, Sam sought support from me at lunch, knowing I had not known the woman who had passed away. Sam specifically referenced that she did not want to discuss her feelings with anyone who had known the woman well, as they needed time to deal with their own grief and she did not want to them to feel guilty or concerned about reaching out to her for support. At the same time, Sam knew that, if she did not attend her own health and wellness, she would become unable to provide support to others. In spite of this, however, her guilt and shame over her intense emotions and lingerings continued and acknowledging any rewards was out of the question as she believed this would mean she was receiving benefits from others' pain.

Why did Sam feel so guilty and ashamed? Guilt and shame are complex emotions and, thus, numerous elements are at play when they emerge. Certainly, North American approaches to and attitudes regarding encounters with narratives and/or images of human suffering, distress, and/or violence could be seen in the interpersonal reactions to Sam's experiences, as well as Sam's own beliefs about how a "good person" would have responded to the situation she found herself in. While there are many other factors that could be outlined and explored, I want to focus on one factor that I believe is central to the guilt and shame puzzle. That factor is North American commercialization and commoditization of human experience.

Central to Sam's guilt and shame was the idea that, any personal or interpersonal attention and care she received took attention and care away from the loved ones of the woman who had passed away. This concern had nothing to do with the time, place, or way this attention and care was sought; any attention or care, including receiving compassion, was seen as taking away support from others. Such beliefs position attention, care, and compassion as limited resources. They are treated as commodities, requiring proof of need and deserving in order to be doled out (Govier 63). While there can be limits on each individual's time and energy, there does not need to be a societal shortage of compassion, attention, or care (O'Brien 108). If given freely, these should be renewable resources that everyone can access within themselves and with the assistance of others (O'Brien 108).

When guarded and doled out based on judgments about whether or not individuals' experiences are worthy, however, compassion, attention, and care are turned from almost unlimited aspects of our shared humanity and human connection to limited

commodities that are bought and sold through the currency of socially acceptable suffering. This then can create a shortage of compassion, attention, and care. This shortage can occur on structural, interpersonal, or even personal levels as people are taught to judge whether or not they “deserve” even their own compassion, attention, and care.

Interestingly, scholars, journalists and the general public have already raised concerns about whether empathy and compassion are waning in North American society (Caldwell 2). Incidents ranging from mass shootings to people videotaping individuals dying rather than trying to help them have led to questions about whether there is now a lack of empathy and compassion in North America (Caldwell 2). While some scholars, politicians, and journalists have been asking questions and looking at the complexities of these situations, others have been hunting for culprits, suggesting that video games (Bilton), aggressive music (Montanaro & Parks), and social media (Small & Vorgan) are “causing” an increasing shortage in empathy and compassion. In spite of these latter theories and the preliminary research that has been conducted into some of them, significant gaps remain in our understanding of how compassion and empathy function, where they stand in North American society, and the dynamics that contribute to this standing. What is clear, however, is that there is now a movement in North America to explore empathy and compassion and, perhaps, over the course of this exploration, to re-evaluate previous approaches to health and wellness.

This section has addressed attitudes regarding and approaches toward the consequences of encountering narratives and/or images of human suffering, distress, and/or violence. To begin, I discussed contemporary North American understandings of

pain, suffering, distress, and death, along with concerns scholars have raised in relation to these understandings. Following that, I examined the connections amongst judgment and stigma; encountering narratives and/or images of human suffering, distress, and/or violence; and individuals' health and wellness. I then considered the commoditization and commercialization of human experience, before closing with an exploration of empathy and compassion in North American society. With this groundwork in place, I now turn to my research and what it has to offer in relation to the material I laid out in this section.

The Current Study and North American Society

Although my study offers much to the entertainment industry, its contributions do not end there. In this section, I reflect on what my study can provide to North American society as a whole. The section opens with a look at one area of actors' mastery and what it could mean for society. Then, I use my research to challenge contemporary North American understandings of and approaches to encountering narratives and/or images of human suffering, distress, and/or violence. From there, the way the extensive information I have gathered through my study can be used throughout society is addressed. Actors' lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence are laid out next, followed by what my research can offer to individuals' relationships with resilience; senses of value in their own encounters with narratives and/or images of human suffering, distress, and/or violence; and joy. Finally, I conclude by touching on the importance of health and wellness for all people.

Before speaking about my research in relation to North American society, I believe it is important to establish what actors' experiences can offer members of the general public. Through their work, actors frequently engage with various narratives and/or images of human suffering, distress, and/or violence. In addition, with shows generally focusing on the most exceptional or climactic period in characters' lives, referred to as the *day of all days*, actors are continually confronting, exploring, and representing heightened experiences. Therefore, professional actors could be considered masters in navigating the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence, as well as in forms of attention and care that can provide support while engaging with such narratives and/or images.

Actors could also be viewed as masters of compassion and empathy. As I introduced in chapter 4, actors' work requires them to find compassion for and foster empathic connections with their characters. In addition, participants in my study often developed compassion and/or empathy for individuals whose quotidian experiences were in line with the experiences of the characters these participants portrayed. Finally, my participants described their work requiring them to have an interest in and compassion for humanity and the human condition. The amount of training actors generally engage in to develop their compassion and empathy, combined with the experience their work brings them, would qualify them as masters in these areas.

Beyond that, research could be seen to tie acting not just to compassion and empathy but, potentially, the process behind them. Gallagher argued that narratives are central to humans' understandings of self, others, and the world at large (371). According to him,

[Narratives] give us a form or structure that we can use in understanding others...

We start to see others engaged in their actions, not simply in terms of the immediate and occurrent context. We start to see them as engaged in longer-term projects (plots) that add meaning to what they are doing. (Gallagher 371)

This reveals the important role of narrative in compassion and empathy.

Gallagher and scholars who have subscribed to his narrative-based approach to empathy, however, have pushed beyond this idea, arguing that narrative is actually fundamental to the process of empathy. According to Gallagher, “[u]nderstanding persons in the context of their situation – having a sense of what their story is – is essential to forming an empathic attitude toward them” (374). Research into altruism has supported this idea, demonstrating that individuals have stronger empathic responses when they are aware of others’ life stories than when they are not (Gallagher 374). Gallagher suggested that the reason for this is that narrative allows for recognizing others’ circumstances and understanding them, their actions, and their affective states, all of which are the building blocks of empathy (377).

Narrative is also central to acting. As I have established, actors both work with shows’ narratives and build their own character narratives in order to understand what motivates those characters’ actions and feelings. Given this and the ideas put forward within narrative-based approaches to empathy, empathy and compassion, as well as the processes leading to them, appear to be entwined with acting. This supports the argument that actors can be viewed as masters of compassion and empathy. This mastery is even acknowledged in compassion research, where participants in studies have referenced

feeling like actors or thinking like actors in order to understand and connect with others (Gallagher 370; van der Cingel 681).

Actors' work with compassion and empathy leads to one other area of mastery: human connection. There are multiple types of connection that actors engage with, including with their selves, scene partners, and audience members. Not only do actors engage with connections such as these, but they also explore the unique elements of various dynamics and forms of connection, as well as the nature of human connection itself. Honest, deep connections are so fundamental to their work that actors frequently have a natural talent in forming such connections or learn how to do so early in their training. Throughout their careers, actors then continue to develop their ability to form these connections. With the amount of time, energy, and focus actors put into exploring, building, and representing human connections, I believe it is appropriate to consider them masters in this area.

If my arguments regarding professional actors' areas of mastery are accepted, then the themes that were identified in my study are clearly able to challenge current North American assumptions about and approaches to encountering narratives and/or images of human suffering, distress, and/or violence in quotidian life. The first challenge relates to pathologization. There are scholars and others who have consistently raised concerns about the risks of pathologizing individuals who encounter narratives and/or images of human suffering, distress, and/or violence (Campbell 100). Actors' resistance to their experiences being pathologized and the stigma they come up against when they are pathologized certainly support concerns about members of the general public being

pathologized in relation to their lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence.

In chapter 5, I challenged the use of the medical model in relation to actors. Now, I extend that challenge to question the efficacy of applying the medical model to members of the general public's experiences with narratives and/or images of human suffering, distress, and/or violence. As with actors, are the rewards individuals receive in relation to these experiences being ignored? Are individuals who do not meet the criteria to be pathologized being left without the attention and care they want or feel they need? Are people avoiding speaking about the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence or not seeking forms of attention and care for fear of being judged? While further study is required to explore the range of individuals' experiences with narratives and/or images of human suffering, distress, and/or violence outside workplaces, my research demonstrates the need for such research to be undertaken. Until this research occurs, my study challenges the ethics and efficacy of employing the medical model in relation to members of the general public's lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence.

Along with the medical model, the themes that were identified in my study challenge the judgment and stigma being levied against those who experience consequences related to encountering narratives and/or images of human suffering, distress, and/or violence. There are areas of overlap between the judgments and stigma actors face and those currently built into North American culture in relation to the consequences of encountering narratives and/or images of human suffering, distress,

and/or violence in quotidian life. For example, there is a powerful resonance between actors and members of the general public being taught, told, or shown that they have no “right” to experience costs or rewards in relation to encountering narratives and/or images of human suffering, distress, and/or violence. In addition, there are parallel judgments made about those who do experience costs and/or rewards. These include the idea that experiencing costs and/or rewards is selfish, wrong, and demonstrates weakness or instability. The parallels should come as no surprise as the judgment and stigma levied against actors and members of the general public emerge from the same source: North American understandings of and approaches to empathy, compassion, and the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence.

My research, however, demonstrates that these judgments and the stigma that often accompanies them are simply not accurate in relation to actors’ lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence. In fact, both my research and studies conducted with non-arts professionals have shown that these judgments are not based in the realities of human experience or how compassion, empathy, and emotions work. According to my research and studies in other fields, instead of demonstrating selfishness or weakness, experiencing consequences related to encountering images and/or narratives of human suffering, distress, and/or violence indicates powerful compassionate and/or empathetic connection (Figley, *Compassion Fatigue: Coping* 1). With attention and care, that connection can be used as a basis from which individuals can relate to others; better understand others’ needs; and/or influence change on personal, interpersonal, and/or societal levels.

Judging, hiding, and/or attempting to dismiss consequences can give them additional power, increasing costs' intensity and creating an inward focus, which can lower human connection and, with it, compassion and empathy. Individuals' abilities to support others and/or influence change can also decrease as costs increase. In spite of all this, as was established in the last section, North American society often pushes people to avoid and/or suppress consequences arising from encounters with narratives and/or images of human suffering, distress, and/or violence. While participants in my study did not claim that it is easy to confront consequences, they did foster hope and provide examples of the level of health and wellness that can be achieved by doing so while engaging with various forms of attention and care.

Confronting consequences is additionally challenging now, however, as societal judgment and stigma encourage self-judgment, hiding costs, and attempting to ignore the consequences of encountering narratives and/or images of human suffering, distress, and/or violence. If such societal judgment and stigma are intended to prevent selfishness and poor health and wellness, many studies, including mine, have shown that this is not the outcome. Instead, the judgment and stigma are feeding the situations they are apparently trying to prevent. On the other hand, the themes that were identified in my study have demonstrated that, if consequences are acknowledged and if individuals have access to and employ forms of attention and care, their health and wellness increases, as do their resilience and abilities to support others. Thus, my study challenges current North American attitudes about and approaches to the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence.

North American judgment and stigma do not end with consequences, however. They also emerge in relation to attention and care. Certain forms of attention and care often have judgments levied against them, as do the individuals engaging with these forms. For example, taking downtime is frequently framed as laziness in North America's consumerist society, where productivity is prized (Gini 29). Judgments and stigma are further increased when the experiences driving individuals to seek attention and care are deemed "unacceptable" or "wrong". Currently, in North America, any consequences of engaging with narratives and/or images of human suffering, distress, and/or violence tend to be deemed unacceptable or wrong, however, increasing the likelihood that most individuals who encounter such consequences will face judgment and stigma if they employ forms of attention and care. This is highly problematic as it could discourage these individuals from seeking out and employing forms of attention and care they may require.

My participants revealed the deep impact forms of attention and care can have on personal, interpersonal, and societal levels. In addition to their role in the health and wellness of individuals engaging with narratives and/or image of human suffering, distress, and/or violence, forms of attention and care helped my participants' relationships with others, their work, and their ability to contribute to socio-political change. Hopefully, with my study and studies in other fields having demonstrated the significance of attention and care, judgments and stigma about seeking such support will begin to shift.

In addition to areas already discussed in this section, the themes that were identified in my research also challenge the idea of finite compassion, a topic introduced

above. All participants in my study had played numerous roles that involved representing human suffering, distress, and/or violence; had simultaneously engaged in multiple shows that included narratives and/or images of human suffering, distress, and/or violence; and had experienced feeling for and with a range of characters facing a variety of emotions and circumstances. Participants also did this while navigating their responsibilities as actors onstage and as partners, parents, children, friends, and other such roles offstage. Actors' abilities to feel with and for so many characters, as well as to engage in quotidian interpersonal dynamics, demonstrate that compassion, empathy, and human connection need not be scarce resources. In fact, my research has clearly shown that human beings have the capacity to experience compassion and/or empathy at various levels of intensity, related to multiple people and/or circumstances, at one time. At the same time, my study has revealed that experiencing consequences without access to attention and care - and, at times, with access to them - can threaten the abundance of compassion, empathy, and human connection. Therefore, it is vital for individuals to have as much support available to them as possible in order to help them maintain their resilience and manage the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence.

While the themes that were identified in my study challenge current North American attitudes about and approaches toward individuals' lived experiences of engaging with narratives and/or images of human suffering, distress, and/or violence, that is not all it has to offer the general public. In fact, I believe that one of my research's greatest contributions to North American society has been information. As with studies in other fields, my research has provided information about costs and rewards related to

engaging with narratives and/or images of human suffering, distress, and/or violence, as well as forms of attention and care that can support individuals who encounter such narratives and/or images. My research, therefore, has contributed to the growing bank of information emerging about the human experience of engaging with narratives and/or images of human suffering, distress, and/or violence; the potential consequences of such engagement; and forms of attention and care individuals feel support them when they do engage.

Having a bank of information can be of assistance on multiple levels. First, there are the ways the information is already being used, including to support a variety of professionals and to allow researchers to compare their work. In addition to these applications, however, there are ways the information can be utilized by North American society and members of the general public. For instance, according to numerous studies, including my own, education regarding the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence and forms of attention and care is vital. Thus far, however, academics have largely focused on industry specific post-secondary education and on professional development. What if education about the material listed above was made available to students in elementary and/or high school?

Certainly, providing young people with information about the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence and forms of attention and care could provide a basis for any additional, industry specific training later in life. The level of consistency amongst various compassion-based studies, however, suggests that the consequences have been identified extend beyond certain careers, speaking to a larger human experience of engaging with narratives and/or images

of human suffering, distress, and/or violence. In addition, individuals are almost guaranteed to engage with narratives and/or images of human suffering, distress, and/or violence at some point in their lives. Educating young people about this human experience could help them understand, acknowledge, and navigate any consequences that arise in their lives; develop and engage with forms of attention and care; and support others. On a societal level, early, widespread education could normalize consequences and engaging with forms of attention and care, hopefully leading to more open, accepting societal attitudes about and approaches to the lived experience of engaging with narratives and/or images of human suffering, distress, and/or violence.

One key area where my research can encourage more acknowledgement and acceptance on personal, interpersonal, and societal levels is connected to the rewards of engaging with narratives and/or images of human suffering, distress, and/or violence. Currently, North American society generally does not acknowledge or accept these rewards. My study, however, has shown that rewards are not only a part of the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence, but are central to maintaining health and wellness while doing so. Should this information reach the general public, it could alter the way people view such rewards, as well as the judgment and stigma placed on experiencing them. Hopefully, this will then give people permission to acknowledge and embrace rewards related to engaging with narratives and/or images of human suffering, distress, and/or violence rather than hiding them, shying away from them, or judging them.

Participants in my study also showed the complexities inherent in life and lived experiences. Rather than dismissing or reducing these complexities when engaging with

narratives and/or images of human suffering, distress, and/or violence, my participants promoted accepting and embracing them whenever possible. Phenomenologists have long argued that North American society reduces human experience, not honouring all its intricacies (Merleau-Ponty, *The World* 32). Now, my participants have revealed the complexities of the lived experience of engaging with narratives and/or images of human suffering, distress, and/or violence and have given people permission to encounter the full range of these complexities.

Finally, my study and similar studies conducted in other fields have demonstrated the importance of individuals' health and wellness, especially when engaging with narratives and/or images of human suffering, distress, and/or violence. In addition, I and other researchers have noted the need to give attention to health and wellness. With its capitalist, consumerist values, however, North American society generally prioritizes productivity, resulting in health and wellness often getting ignored or overlooked (Illich "The Killing of Pain"). Aside from the fact that this is ethically problematic, it can create societal issues. After all, society relies on human connection and engagement, both of which require certain levels of vulnerability (Harris & Botticelli 197). My research establishes that great strength and trust are necessary for vulnerability. Strength and trust, however, are difficult to maintain when individuals do not have their health and wellness (Harris & Botticelli 198). Therefore, health and wellness is critical on personal, interpersonal, and societal levels.

When individuals' health and wellness decreases, their strength and trust can falter, destabilizing their connections with self and others. As connections are destabilized, individuals' interpersonal supports can diminish or break down. This

contributes to a cycle where fewer forms of attention and care are available and/or being engaged with, leading to more individuals becoming exhausted and overwhelmed, more connections destabilizing, and greater social disconnect.

My participants experienced a parallel cycle on personal and interpersonal levels. Continuing to accept the idea of actors as masters in the spaces I outlined at the start of this section, my research suggests that, to maintain a healthy society filled with human connection, compassion, and empathy, individuals' health and wellness need to be seen as priorities and given consideration accordingly. Certainly, much more research is needed to fully understand the lived experience of engaging with narratives and/or images of human suffering, distress, and/or violence in non-work environments. In the meantime, however, the themes that were identified in my study challenge current North American attitudes about and approaches toward engaging with narratives and/or images of human suffering, distress, and/or violence, suggesting alternatives to those attitudes and approaches.

In this section, I explored what my research can provide to North American society as a whole. First, I established actors' areas of mastery. From there, I presented the ways the themes that were identified in my study challenge current North American understandings of and approaches to encountering narratives and/or images of human suffering, distress, and/or violence. Next, opportunities to shift current attitudes and approaches were addressed. The section concluded with an examination of the important role of health and wellness on personal, interpersonal, and societal levels.

Final Thoughts

Years ago, while watching *American Psycho*, I questioned the consequences of representing human suffering, distress, and/or violence. At that time, I was just about to enter the final year of my undergraduate degree. Over the next two terms, I completed a written thesis and a performance thesis, both of which explored the consequences of representing human suffering, distress, and/or violence. By the time I graduated, I was on a mission to *fix* the Canadian entertainment industry and *save* the actors working within it. Even as I established myself as a working, professional actor, completed my Masters degree, and was accepted into my PhD program, I remained determined to complete my mission. I entered my PhD studies passionate about vicarious trauma scholarship and proud to be a crusader for vicarious traumatic stress being accepted by all areas of the entertainment industry. This was in spite of the fact that I would be offended when someone who only knew me as an actor would try to label me as being traumatized by my work or attempt to rescue me from it.

By the time I began conducting my research study, I had relinquished my attachment to vicarious trauma studies and my crusade to have vicarious traumatic stress acknowledged within the entertainment industry. I had also shifted to a phenomenological framing for my study. I was certain I was working from an open-minded place; but, I was still caught in the assumption that my research would reveal that vicarious traumatic stress was key to understanding and helping actors navigate (read: saving actors from) the consequences of representing human suffering, distress, and/or violence. During my first interview, though, my assumptions were blown apart. I realized

that the actor I was speaking with did not want or need saving anymore than I did. With each interview and every participant, this realization was further reinforced.

Looking back, the attitude I started my research with was shortsighted, paternalistic, and failed to give other actors the respect they deserved. It was also a form of protection from my own insecurities as an academic and the pressure I felt to make a definitive contribution to scholarship, the entertainment industry, and society as a whole. As I listened to my participants, however, my attitude and approach shifted.

When this occurred, I became more personally invested in my participants and their experiences. I found myself encountering more costs related to the interviews and realized that my previous approach had prevented me from really engaging with participants' rewarding and challenging experiences. While I no longer had that protection, I did have actual human connection; and, as much as I encountered costs, I now also discovered powerful rewards. My joy increased and I developed a great sense of value in both my acting and academic work. I also found myself inspired by participants to build a stronger support system for myself and to engage with more forms of personal, interpersonal, and structural attention and care. As I did this, I noticed myself becoming increasingly resilient. I had intended to save my participants, but their wealth of knowledge ended up assisting me.

By the time I finished my study, I understood that all my participants wanted and needed from me was to hear them and share their lived experiences with others, as well as complete a balanced, qualitative analysis of their interviews. These latter two tasks became my new goals, along with doing my part to help build and maintain a more open entertainment industry that values all actors' agency and health and wellness. I now saw

vicarious trauma studies as problematic and counterproductive to those goals, so I turned to more collaborative framings, such as those found in compassion studies.

At the same time as my academic views were broadening, my professional experience with representing human suffering, distress, and/or violence was growing. While conducting my research, I had taken on my most challenging role to date, representing a serial killer in the feature film, *SCARS*. As with other roles that involved representing human suffering, distress, and/or violence, I found myself encountering intense emotions and powerful lingerings while performing the role of the killer. This time, however, the lived experiences of 20 other professional actors supported and guided me. I noticed the costs I was encountering and identified them as relating to my work much faster than I had in the past. In addition, I forced myself to actively strengthen and engage with personal, interpersonal, and structural forms of attention and care.

The biggest shift for me, however, was that I stopped feeling guilt or shame about experiencing consequences related to representing human suffering, distress, and/or violence. Unlike before, when I would only speak about such consequences with co-workers I trusted, if I spoke at all, I now talked openly about them, providing friends and family with information about the potential costs and rewards of representing human suffering, distress, and/or violence, as well as various support systems that I found helpful. I also discussed my experiences – in a professional manner – with my director and producers who, after learning about my research, had encouraged our entire cast and crew to communicate about any consequences that arose in relation to our work on the film.

While I engaged in various forms of attention and care, I continued to encounter intense emotions and powerful lingerings. Halfway through production, I experienced the most challenging day of my acting career thus far. The scenes we were shooting that day took place during a home invasion. My character had to torture and kill the two home owners. It was also established that she killed the family dog off-screen. Since the home invasion was the first major scene of violence we were shooting, I re-watched research material I had gathered for my role, which included an interview with serial killer, Richard Kuklinski. This interview was especially helpful to me in terms of understanding the viewpoint of individuals who engage in serial murder as Kuklinski reported seeing his victims in the same way he saw furniture. This statement guided my performance in the film, particularly during the home invasion scenes. While I never disappeared into my character or lost control at any point during the day, I did manage to sit in this view of human beings as furniture while shooting my scenes.

The fact that it was even possible for me to make myself see others in this way shook my sense of self. Just as many of my participants had done, I questioned what kind of person I was if I could represent a serial killer convincingly. What did being able to understand and step into a serial killer's view of others being the equivalent of furniture, however briefly and in however controlled an environment, mean about me as a person? In the days following the home invasion shoot, I was shocked by the number of lingerings I was experiencing and their power. These were the most extreme costs I had ever experienced. Even though I was engaging with various forms of personal, interpersonal, and limited structural attention and care, I found myself overwhelmed by the lingerings I was encountering.

At this point, I knew I needed additional support to help me navigate the costs I was experiencing, as well as the questions and fears I had about my own position as an ethical, compassionate individual. I was straightforward with my family, friends, and director about seeking professional support, although I did not discuss it with the film's producers. I met with a therapist several times. After that, I felt secure in my sense of self and able to navigate the remainder of the lingerings I encountered with the support of personal and interpersonal forms of attention and care. I did, however, wish there were structural forms of attention and care available to me beyond my employers acknowledging the consequences of engaging with narratives and/or images of human suffering, distress, and/or violence.

Interestingly, while the costs that I encountered while shooting *SCARS* were the most extreme I had experienced in my career up to that point, being honest about them with myself and others; engaging with forms of attention and care; and being open to seeking professional help when I needed to allowed me to emerge from the project with increased resilience, few long-term costs, and powerful work related rewards. Central to developing such resilience and rewards was moving past the shame, guilt, and self-judgment I had always experienced in the past when encountering costs related to representing human suffering, distress, and/or violence.

Even when I faced judgment from others, I did not take it on. Instead, I turned to the statements made by 20 other professional Canadian actors, using them to remind myself that encountering costs related to representing human suffering, distress, and/or violence did not equal being abnormal, weak, unstable, or a poor actor. Having this bank of information that provided me with knowledge of costs, rewards, and forms of attention

and care, in conjunction with an accepting work environment, not only allowed me to grow as an actor, but also let me explore challenging material more deeply than I ever had before, as I trusted that I had the ability and support necessary to navigate the consequences of my work. In the end, I was able to give the strongest, most complex performance of my career thus far.

Over the course of my research, I faced great challenges. By embracing these challenges, however, I grew as an actor, scholar, and person. I discovered levels of resilience I did not know I had and developed even more. I found greater joy and a powerful sense of value in both my academic and artistic work. Most importantly, I learned to embrace my humanity and the humanity of others. I will be forever grateful to the actors who participated in my study for all they have taught me and for the trust they have placed in me. Now, I look forward to continuing to share their insights with other actors, entertainment professionals, academics, and the world at large.

Conclusion to Chapter 6

Throughout this sixth and final chapter of my dissertation, I expanded the realm of my attention. First, I explored what my study can offer the entertainment industry as it moves forward. After that, I considered the next generation of research, including studies that have already been spawned by my work and potential areas of interest for future studies. I then established the larger social implications of my research, using it to challenge current North American attitudes about and approaches toward consequences related to engaging with narratives and/or images of human suffering, distress, and/or violence.

POST-SCRIPT. CONCLUSION OF THE STUDY

This dissertation's six chapters together have explored professional actors' lived experiences of representing human suffering, distress, and/or violence. Chapter 1 provided an introduction to my study and to the questions it would be addressing. In chapter 2, I reviewed key terms and literature. Chapter 3 laid out the methodology and ethical protocols that I employed in my research. Next, in chapter 4, I focused on the three core themes that were identified in the study. Within Chapter 5, I scrutinized these themes in relation to the literature I presented in chapter 2, as well as additional relevant literature. Finally, chapter 6 covered my conclusions, including possibilities for further research and the broader implications of my study. It is my hope that the information I have presented here will be of assistance within academia, the entertainment industry, and North American society. Most of all, however, I hope my study and this dissertation assist actors as they continue to represent human suffering, distress, and/or violence – and continue I am sure they will. After all, as one of my participants stated about acting in general and representing human suffering, distress, and/or violence in particular, "I'm not doing it for stardom and I'm certainly not doing it for the money. You do it for the work ... it's a calling" (Interview 2).

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Appendix A

Letter of Invitation for Participation in a Study on The Consequences and Ethics of Representing Human Suffering, Distress, and/or Violence

Dear Theatre Artist,

I am conducting a research project that looks at the impact of creating representations that include narratives of human suffering, distress, and/or violence. The intent of the study is to inquire into personal experiences of artists in order to better understand what it is like to create representations of human suffering, distress, and/or violence. The researcher is particularly interested in whether artists have any troublesome consequences from creating these representations and, if there are any, what can be done to mitigate these effects.

I am inviting you to participate in this important project by meeting with me to discuss your experiences of creating or working on productions that include narratives of human suffering, distress, and/or violence. The interview will last about an hour. As the researcher, I want to look into these experiences to discover the range of thoughts and feelings affiliated with such representations, and to explore any troubling consequences of this form of acting. I will look at the contributions from all participants to identify meanings and essential elements that help us better understand the impact of creating a production that includes narratives of human suffering, distress, and/or violence. If you are 18 years or older, please consider contributing to the study on The Effects and Ethics of Representing Human Suffering, Distress, and/or Violence. If you wish to participate, please do the following.

Contact Danielle I. Szlawieniec-Haw at [redacted] or [redacted], and state your interest in meeting for an interview. My questions are very open and general. In an interview, I will ask you to please speak about your experiences of creating and/or working with representations of human suffering, distress, and/or violence and the discussion will be tape recorded. I will ask you to speak about your experiences until you have nothing further to say about it.

If you are interested in meeting for an interview, you will be asked to sign an informed consent before the session starts. The consent will state that there are minimal risks or benefits for you. The risk is that speaking about personal experiences may surface some distress for you. I will provide a phone number for a distress line should you need to speak with someone after the interview. On the other hand, some people benefit from speaking about their experiences. The benefits will be to the broader theatre community of researchers and artists who are seeking to understand the impact of representing human suffering, distress, and/or violence in order to ensure the health and safety of professional theatre artists. There will be refreshments and finger foods at the focus group sessions.

If you have any questions or concerns about the study, please contact the Principal Investigator, Danielle I. Szlawieniec-Haw at [redacted] or [redacted].

Your participation will add to the success of this project and I look forward to your contribution. Thank you for your time and attention.

Yours sincerely,

Appendix B

Information and Informed Consent for Participating in Interviews on The Consequences and Ethics of Representing Human Suffering, Distress, and/or Violence

Dear Theatre Artist,

I am conducting a research project that looks at the impact of creating representations that include narratives of human suffering, distress, and/or violence. The intent of the study is to inquire into personal experiences of artists in order to better understand what it is like to create representations of human suffering, distress, and/or violence. The researcher is particularly interested in whether artists have any troublesome consequences from creating these representations and, if there are any, what can be done to mitigate these effects.

I am inviting you to participate in this important project by meeting with me to discuss your experiences of creating or working on productions that include narratives of human suffering, distress, and/or violence. The interview will last about an hour. As the researcher, I want to look into these experiences to discover the range of thoughts and feelings affiliated with such representations, and to explore and troubling consequences of this form of acting. I will look at the contributions from all participants to identify meanings and essential elements that help us better understand the impact of creating a production that includes narratives of human suffering, distress, and/or violence.

Should you choose to participate, you may stop the discussion at any time and you may also ask to leave the study at any time. The tape recorded discussions will be transcribed so that I, as the researcher, can look for themes or core ideas from all participants.

There are minimal risks or benefits for you. The risk is that speaking about personal experiences may surface some distress for you. I will provide a phone number for a distress line should you need to speak with someone after the interview. Some people find it helpful to speak about their thoughts and experiences. The benefits will be to the broader theatre community of researchers and artists who are seeking to understand the impact of representing human suffering, distress, and/or violence in order to ensure the health and safety of professional theatre artists.

Personal information about you will be kept confidential and all names and identifying information will be removed from all reports. I may use words and phrases from your dialogue but they will not use your name on any report. Should you choose, you will also have access to any written reports or papers that are published about the study.

If you have any questions or concerns, please feel free to contact York University's Human Participants Review ('Ethics') Sub-Committee at [redacted] ([redacted]). Or, you may contact the Principal Investigator, Danielle I. Szlawieniec-Haw at [redacted] or [redacted].

Your participation is an active ingredient to the success of this project and I look forward to your contribution. Should you have any questions, please let me hear from you.

Yours sincerely,

Having read the information and Informed Consent Form, and having had my questions about participating answered to my satisfaction, I hereby give my informed consent to participate in the research on the effects of representing human suffering, distress, and/or violence.

Signature of Participant

Date